

# Application for RICl Waiver Form

## Sponsor details

Name:

Division:

Contact details:

## Applicant details\*

\* Waiver applications for more than one person can be made on this form provided all other details are identical.

1	Name	<input type="text"/>
	DOB	<input type="text"/>
	Company	<input type="text"/>
2	Name	<input type="text"/>
	DOB	<input type="text"/>
	Company	<input type="text"/>
3	Name	<input type="text"/>
	DOB	<input type="text"/>
	Company	<input type="text"/>
4	Name	<input type="text"/>
	DOB	<input type="text"/>
	Company	<input type="text"/>
5	Name	<input type="text"/>
	DOB	<input type="text"/>
	Company	<input type="text"/>
6	Name	<input type="text"/>
	DOB	<input type="text"/>
	Company	<input type="text"/>

## Details of activity

Date of work/activity: From

Location of work/activity:

Description of work/activity:

## Protection Arrangements

All activities associated with this application have been assessed by a Protection Officer or person with relevant worksite protection competencies and the necessary protection will be implemented. Yes  No

The applicant/s will be supervised at all times by a Protection Officer or person with relevant worksite protection competencies whilst in the Rail Corridor. Yes  No

The applicant/s will receive an induction and any applicable pre-work briefing prior to entering the Rail Corridor. Yes  No

The applicant/s will wear high visibility clothing and any other applicable PPE. Yes  No