

Ground Disturbance Permit

Request information	Permit information
Date:	Issued Date/Time:
Job Name:	Expiry Date/Time:
Type or disturbance:	Reference #:
Size of disturbance:	Issuer:
Utility search zone size:	PERMIT #:
Location / Description of Work:	

Contact Information

	Name	Company	Phone Number
Issuing Authority			
Performing Authority			
Qualified Line Finder			
One-Call Public Locator	NA	Alberta One Call	1-800-242-3447
Emergency Contact	NA	911	911
Alternate Emergency Contact	NA		

Utility Locating Services

Utility Service Alert Notification (1-800-242-3447)			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
On Call Ticket #:			
Date Called:	Expires:	Caller:	
Date Extended:	Expires:	Caller:	
Date Extended:	Expires:	Caller:	
Private Utility Locating Service / Geophysical			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Name of Locating Service:		Date Completed:	
Locating Technician:		Contact Phone #:	
Utilities Found and Marked?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	Map Attached?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Hand Clearance Performed (Air Knife or Hand Auger)			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Name of Locating Service:		Date Completed:	
Locating Technician:		Contact Phone #:	
Method Used:		Depth & Diameter of Hole:	
Utilities Encountered:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hole Backfilled:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Safety Review

All items must be checked before work can proceed.	✓	n/a
Within the last 10 days, and no less than 48 hours from the initiation of this task, contacts were notified that a One-Call utility locate was made to confirm the existence and location of underground facilities near the work area.	<input type="checkbox"/>	<input type="checkbox"/>
Available records have been referenced, and a plot plan indicating the location of all underground facilities (including those installed horizontally) has been provided and is available for reference at the work site.	<input type="checkbox"/>	<input type="checkbox"/>
All approvals, notifications and agreements have been obtained and are attached to this permit.	<input type="checkbox"/>	<input type="checkbox"/>
A Competent Person (CP) has conducted a pre-job safety meeting, including a review of the Risk Assessment and TSEA.	<input type="checkbox"/>	<input type="checkbox"/>
Everyone involved in the work has reviewed the health and safety plan (HASP) and the emergency response plan (ERP), and the plans are available on site for anyone to review at any time.	<input type="checkbox"/>	<input type="checkbox"/>
The proposed ground disturbance area(s) have been identified and all underground facilities in the search zone and dig zone have been marked.	<input type="checkbox"/>	<input type="checkbox"/>
Competency of the line locator, and calibration of the relevant equipment, have been verified. Proofs of competency and calibration records are attached to the permit or in the project safety record.	<input type="checkbox"/>	<input type="checkbox"/>
Approved techniques for exposing underground facilities within 2' of ground disturbance have been (or will be) used to verify the location of all known underground facilities.	<input type="checkbox"/>	<input type="checkbox"/>
Other work permits, as applicable, have been completed and are attached.	<input type="checkbox"/>	<input type="checkbox"/>
Precautions have been taken to prevent contact with overhead or below-ground power lines.	<input type="checkbox"/>	<input type="checkbox"/>
Possible environmental and archeological issues have been assessed and addressed.	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate internal communications (e.g. area authority, environmental business manager), if applicable, have taken place.	<input type="checkbox"/>	<input type="checkbox"/>
For all new non-metallic underground facilities being installed, line locating capabilities are being installed with it.	<input type="checkbox"/>	<input type="checkbox"/>
All Workers involved with the ground disturbance have reviewed and discussed the Ground Disturbance Practice.	<input type="checkbox"/>	<input type="checkbox"/>
The valid certifications of the qualified equipment operator have been reviewed and are attached to this permit or in the project safety record.	<input type="checkbox"/>	<input type="checkbox"/>
The excavation design and construction checklist for trenching has been completed for the initial ground disturbance.	<input type="checkbox"/>	<input type="checkbox"/>
A trench safety daily field report shall be completed each day prior to the start of work for open trenches and excavations.	<input type="checkbox"/>	<input type="checkbox"/>
All Workers involved in drilling have reviewed and discussed the RM Environmental Drilling Practice.	<input type="checkbox"/>	<input type="checkbox"/>
Risk has been adequately assessed, and provisions have been or will be made to address unattended open excavations to verify the safety of the general public, livestock and wildlife until the site is remediated.	<input type="checkbox"/>	<input type="checkbox"/>

Utilities Identified

Below-Ground Services					Below-ground utilities in work area? <input type="checkbox"/> Yes <input type="checkbox"/> No		
✓	Utility	Utility Name	Utility Emergency Phone #	Depth BGS (ft)	Ground Surface Marked	Date of Marking	Utility notified of planned work
<input type="checkbox"/>	Electric				✓ x n/a		✓ x n/a
<input type="checkbox"/>	Gas				✓ x n/a		✓ x n/a
<input type="checkbox"/>	Phone				✓ x n/a		✓ x n/a
<input type="checkbox"/>	Cable				✓ x n/a		✓ x n/a
<input type="checkbox"/>	Pipeline				✓ x n/a		✓ x n/a
<input type="checkbox"/>	Water				✓ x n/a		✓ x n/a
<input type="checkbox"/>	Sewer				✓ x n/a		✓ x n/a
<input type="checkbox"/>					✓ x n/a		✓ x n/a
Above-Ground Services					Above-ground utilities work area? <input type="checkbox"/> Yes <input type="checkbox"/> No		
✓	Utility	Utility Name	Utility Emergency Phone #	Height AGS (ft)	Ground Surface Marked	Date of Marking	Utility notified of planned work
	Electric				✓ x n/a		✓ x n/a
	Phone				✓ x n/a		✓ x n/a
	Traffic Light				✓ x n/a		✓ x n/a
					✓ x n/a		✓ x n/a

Issuing Authority or Competent Person¹

I have reviewed the completed permit(s) and, based on my review of the documented conditions with respect to the scope of work and affected equipment, I believe that the equipment involved or affected by this work has been prepared for this scope of work, and that it is appropriate for the work to proceed.

Signed:

Date:

Print Name:

Title/Position:

¹ Issuing Authorities who are also Competent Persons, as defined by the Ground Disturbance Practice, may self-authorize.

