













WORKSITE PROTECTION PLAN - PO IS RESPONSIBLE TO COMPLETE, IMPLEMENT AND BRIEF THIS PLAN FOR USE IN NSW ONLY

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WORKSITE DETAILS Date:		Start Time: Scope/Type of Work:			Site Supervisor: Full Name					
PO	Full Nam	e	RIW #:	RIW #:		ne:	Signa	Signature:		
NETWORK CONTROL / PPO	NC	NCO Name - Contact Number - NC Board				PPO Name - Contact Number – Location				
Corridor Access Approval #:		Authority/eTAP# 1.		1.		2. 3		4.		
Hand Signaller/Lookout Name	1.	2.			3.	<u>'</u>	4.	•		
WORKSITE LOCATION VALID	ATION:	IIB No. On Track r	ame track at:	Chainage	kms	Infrastructure refe	Validation Methodology KM2M – Photo - SecondPerson			
SAFEWORKING METHOD IMP		ANWT300/WIC/LOW/ASB/TOA/TWA/LPA Nearest Cross Street or Identifiable feature				WORKSITE PROTECTIO AS PER WORKSITE PRO	Second Person validating Name & Signature			
DIAGRAM										
Reference to city/town top left corner to/from The diagram of the worksite	Safe place Name of track(s	each side of worksite	Sign Deli	neation RTS	3	Flag Lookout	Worksite	Assembly Point	First Aid	

If LOW - calculator must be completed in the log and diary



WORKSITE LOG AND DIARY

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THE PO IS RESPONSIBLE FOR RECORDING SAFETY CRITICAL INFORMATION FOR USE IN NSW ONLY

Date/Time	e SAFETY CRITICAL INFORMATION								
SIGHTING	DISTANC	CE for Look	out Workin	g (LO\	W)				
A. Reaction time			Seconds		Maximum permanen		nent		km/h
B. Warning time (NSW		W	Seconds	track speed					
C. Moving time			Seconds		Minin	num sighting			
D. Time to	be in Safe)	Seconds		distar	nce required:			Metres
MINIMUM	WARNING	G	Seconds						
	Т	RAIN INFO	RMATION						
ID#	Time	Time	Speed through	Clea	ared ksite	Cleared Signal	Notes		
	Arrived	Departed							
			worksite		пе	time			