

SPRINKLER AND SUPPRESSION IMPAIRMENT PERMIT

COPY 1 OF 2 — DISPLAY AT WORK SITE

Draining down, valve closure or working on heads — the outage and the precautions that replace it

KD-PTW-SI-024 Rev A0

Taking a sprinkler or suppression system out of service, even in part, is an impairment: BS EN 12845 clause 20 and every insurer require notification, the shortest possible outage, interim precautions and a restoration test. Working near heads without isolation is a different risk — a knocked head floods a floor — and is covered by the "work near heads" option below.

1 PERMIT IDENTIFICATION

PERMIT NUMBER	PROJECT / SITE REF	SITE NAME AND ADDRESS	DATE OF ISSUE
VALID FROM (DATE & TIME)	VALID TO (DATE & TIME)	CROSS-REFERENCED PERMITS / CERTIFICATES	

2 LOCATION AND DESCRIPTION OF WORK

EXACT LOCATION	CONTRACTOR / TRADE		
DESCRIPTION OF THE WORK, AND ITS LIMITATIONS			
RAMS REFERENCE	PERSON IN CHARGE ON SITE	OPERATIVES	SUPERVISOR

3 THE IMPAIRMENT

☐ DRAIN-DOWN / VALVE CLOSED — system or zone out of service	☐ WORK NEAR HEADS — system live; heads protected	☐ GAS / KITCHEN SUPPRESSION — system disabled
SYSTEM / ZONE / CONTROL VALVE	ISOLATED BY (COMPETENT — SPRINKLER CONTRACTOR / AP)	OUT OF SERVICE FROM
INSURER / ARC / FIRE SERVICE NOTIFIED (WHO, WHEN)	MAXIMUM OUTAGE	VALVE TAGGED AND LOCKED?

4 INTERIM PRECAUTIONS

- ☐ Fire watch / patrol of the unprotected area at the stated interval
- ☐ Hot works prohibited in the unprotected area, or only under KD-PTW-HW-001 with the insurer's agreement
- ☐ Additional extinguishers / hose reels at the work face; combustibles minimised
- ☐ Occupants and management informed; evacuation arrangements unchanged or the change briefed
- ☐ Work near live heads: heads protected with guards, no hanging from pipework, no heat near heads
- ☐ Restoration plan: refill, vent, pressure, alarm valve test, flow switch test, control valve open and locked

5 RESTORATION

BACK IN SERVICE (DATE / TIME)	TESTS CARRIED OUT (ALARM VALVE, FLOW SWITCH, PRESSURE)	CONTROL VALVE OPEN, LOCKED, T...	RESTORED BY
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6 ISSUE — ISSUING AUTHORITY

I certify that the hazards of this work have been identified and assessed, that the work site has been examined, and that all precautions specified in this permit — including all isolations — have in fact been taken.

I confirm the validity period is specific to this work period and is not open-ended.

PRINTED NAME	APPOINTED ROLE	COMPANY	SIGNATURE	DATE	TIME

7 AUTHORISATION — SECOND PERSON CHECK BEFORE ISSUE

HSE requires the permit to be seen by a second person before it is issued. I have reviewed this permit and am satisfied it is complete, the scope is properly limited, and it does not conflict with any other permit live in this area.

PRINTED NAME	APPOINTED ROLE	COMPANY	SIGNATURE	DATE	TIME

8 ACCEPTANCE — PERFORMING AUTHORITY

I have read and understood this permit. I understand the hazards and the precautions, I have briefed everyone working under it, and those precautions will be observed for the duration of the work. I will not exceed the scope or the validity period stated.

PRINTED NAME	ROLE	COMPANY	SIGNATURE	DATE	TIME

9 EXTENSION / SHIFT HANDOVER

Complete only where the work continues into a further period. Confirm the plant remains safe and the incoming acceptor is aware of the hazards.

EXTENDED TO (DATE & TIME)	ISSUING AUTHORITY SIG	INCOMING ACCEPTOR SIG	RE-CHECKED (Y/N)
EXTENDED TO (DATE & TIME)	ISSUING AUTHORITY SIG	INCOMING ACCEPTOR SIG	RE-CHECKED (Y/N)

10 SUSPENSION

HSE requires suspended permits to be retained on the permit system, with the condition the plant has been left in and the consequences for other activities recorded.

DATE & TIME SUSPENDED	REASON, AND CONDITION PLANT LEFT IN	SIGNED

11 HAND-BACK — PERFORMING AUTHORITY

I certify that the work described in this permit is complete or has been stopped, that all persons and equipment under my control have been withdrawn, and that the area has been left in a safe and clean condition.

☐ Work COMPLETED ☐ Work PARTIALLY completed ☐ Work STOPPED and not completed

PRINTED NAME	SIGNATURE	DATE	TIME	OUTSTANDING ITEMS

12 CANCELLATION — ISSUING AUTHORITY

I certify that the system has been restored and tested, the insurer notified, and this permit is cancelled.

PRINTED NAME	SIGNATURE	DATE	TIME	REGISTER (INITIALS)

On cancellation, flatten this PDF before archiving so the record cannot be silently edited. Retain for a minimum of 30 days on site (HSG250), then archive in line with your retention schedule.

R REVISION HISTORY

Every revision of this document, and every review that found nothing to change. The revision on the front of this sheet is the one you are holding — check kubitdocs.com for the current one before use.

Rev	Date	Class	What changed	Authorised by
D0	2026-08-28	first-issue	First issue.	— not yet approved —
A0	2026-08-29	review	Approved for issue by the author. Content unchanged from the draft; the draft status strip is removed. No independent third-party review has been carried out.	Author — director, UK principal contractor, SMSTS. Not an independent review.

Class: first-issue · material (the law, a control, a field or the scope changed — past buyers are notified) · editorial (wording or layout only) · review (checked, nothing changed) · withdrawal. Revision prefix D = draft, not approved and not for sale; A = approved for issue by the person named, on the date shown.