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| **Company:** |  | **Site:** |  | **Start date:** |  |
| **Description of Activity** | **Design Prepared by:** | **Risk assessment Method statement prepared by:** | **Additional Manufacturers instructions and inspection periods:** | **Drawing Number**  | **Person Responsible for implementation of design and inspection** | **Permit to commence erection. Date and Time** | **Permit to load. Date and Time** | **Permit to dismantle Date and Time** |
| *E.g. Propping of 300mm floor slab / 12kN/m2 loading bay.* | *e.g. name of designer or engineering company* | *State name of risk assessor* | *e.g. Peri prop detail / RMD Kwikform manual page 21 / 22**Weekly inspection with report* | *e.g. NCSG / CP/101* | *Name:* | *e.g. 28th Jan 2012 @ 1400hrs*  | *30th Jan 2012 @ 08:30* | *7th Feb 2012 @ 09:00* |
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