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| **Petroleum and geothermal energy operations Diving start-up notice** |  |
| *Work Health and Safety Act 2020*Work Health and Safety (Petroleum and Geothermal Energy Operations) Regulations 2022  |

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| **PART A – DIVING CONTRACTOR DETAILS** |
| Company | Click or tap here to enter text. |
| **BUSINESS STREET ADDRESS** |
| Unit no. | Click or tap here to enter text. | Street no. | Click or tap here to enter text. | Lot no. | Click or tap here to enter text. |
| Street | Click or tap here to enter text. | Town/suburb | Click or tap here to enter text. |
| State | Choose an item. | Postcode | Click or tap here to enter text. |
| **POSTAL ADDRESS (COMPLETE IF DIFFERENT FROM ABOVE)** |
| Unit no. | Click or tap here to enter text. | Street no. | Click or tap here to enter text. | Lot no. | Click or tap here to enter text. |
| Street | Click or tap here to enter text. | Town/suburb | Click or tap here to enter text. |
| State | Choose an item. | Postcode | Click or tap here to enter text. |
| Phone | Click or tap here to enter text. | Email | Click or tap here to enter text. |
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| **PART B – LOCATION AND PURPOSE** |
| This is a start-up notice for a proposed diving project that will be conducted at (location) Click or tap here to enter text. under the Work Health and Safety (Petroleum and Geothermal Energy Operations) Regulations 2022 for the following purpose:Click or tap here to enter text. |

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| **PART C – EXPECTED OPERATION DATE** |
| The first diving operation of the project is expected to start on Click or tap to enter a date. With an expected duration of Click or tap here to enter text. days.*Note: The registered operator must submit this start-up notice to the regulator at least 14 days before the day on which the registered operator expects the first diving operation to commence or on another date as agreed between the regulator and the registered operator.*  |

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| **PART D – NUMBER OF PEOPLE, EXPECTED DEPTH AND BREATHING MIXTURE** |
| The total number of people expected to take part in the project is Click or tap here to enter text. people.The number of divers expected to take part in the project is Click or tap here to enter text. people.The expected depth to which the divers will dive is is Click or tap here to enter text. metres.The type of breathing mixture to be used during the project is: Click or tap here to enter text. |

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| **PART E – DIVING PROJECT PLAN (DPP)** |
| The applicable DPP is (title)  | Click or tap here to enter text. |
| Document number | Click or tap here to enter text. | Revision | Click or tap here to enter text. | Date | Click or tap to enter a date. |

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| **PART F – DIVING SAFETY MANAGEMENT SYSTEM (DSMS)** |
| The applicable DSMS is (title)  | Click or tap here to enter text. |
| Document number | Click or tap here to enter text. | Revision | Click or tap here to enter text. | Date | Click or tap to enter a date. |

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| **PART G – DETAILS OF PERSON WHO CAN BE CONTACTED BY THE REGULATOR AT ANY TIME** |
| **PRIMARY CONTACT** |
| Surname | Click or tap here to enter text. | Given names | Click or tap here to enter text. |
| Position | Click or tap here to enter text. | Company | Click or tap here to enter text. |
| **BUSINESS STREET ADDRESS** |
| Unit no. | Click or tap here to enter text. | Street no. | Click or tap here to enter text. | Lot no. | Click or tap here to enter text. |
| Street | Click or tap here to enter text. | Town/suburb | Click or tap here to enter text. |
| State | Choose an item. | Postcode | Click or tap here to enter text. |
| Phone | Click or tap here to enter text. | Email | Click or tap here to enter text. |
| **SECONDARY CONTACT** |
| Surname | Click or tap here to enter text. | Given names | Click or tap here to enter text. |
| Position | Click or tap here to enter text. | Company | Click or tap here to enter text. |
| **BUSINESS STREET ADDRESS** |
| Unit no. | Click or tap here to enter text. | Street no. | Click or tap here to enter text. | Lot no. | Click or tap here to enter text. |
| Street | Click or tap here to enter text. | Town/suburb | Click or tap here to enter text. |
| State | Choose an item. | Postcode | Click or tap here to enter text. |
| Phone | Click or tap here to enter text. | Email | Click or tap here to enter text. |

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| **PART H – COMPLETED BY** |
| Surname | Click or tap here to enter text. | Given names | Click or tap here to enter text. |
| Position | Click or tap here to enter text. | Company | Click or tap here to enter text. |
| **BUSINESS STREET ADDRESS** |
| Unit no. | Click or tap here to enter text. | Street no. | Click or tap here to enter text. | Lot no. | Click or tap here to enter text. |
| Street | Click or tap here to enter text. | Town/suburb | Click or tap here to enter text. |
| State | Choose an item. | Postcode | Click or tap here to enter text. |
| Phone | Click or tap here to enter text. | Email | Click or tap here to enter text. |
| Signature | Click or tap here to enter text. | Date | Click or tap to enter a date. |
| **Complete and forward this form to:** **petreps@dmirs.wa.gov.au** |
| *Note: The registered operator and/or contractor bears duties under Part 2 of the Work Health and Safety Act 2020 and the responsibility for the safe conduct of all activities and the ongoing safety and health of all persons connected to diving operation.* |