

Applicant

Occupational Diving Authority Request: Port of Geelong

- This request is to be emailed to geelong@ports.vic.gov.au and grammassen@ports.vic.gov.au
- The request will be considered by Ports Victoria, and, if confirmation of approval is provided to the applicant, this will be issued
 pursuant to the Harbour Master's Directions current at the time of diving, and section 232 of the Marine Safety Act 2010
 (Vic)
- Approval will not be issued more than 48 hours prior to the commencement of the operations.
- · A new request is required if there are any changes to the operations as detailed in an earlier request.
- A new notification must be re-submitted if the period exceeds 30 days.

| Legal Name: | | Applicant signature confirming that the material in this form is correct. | | | | | | |
|--|--|---|-----------------------|----------|----------------|---------------|-----------|------------|
| Email address: | | | | | | | | |
| | | | Signature: | | | | | |
| | | | Name: Position: | | | | | |
| Diving location and time | | | | | | | | |
| Port: Port of Geelong | | | | | | | | |
| Dive location with the port | | Diving ves | ssel's name | | | | | |
| from time (24-hr) | | to time (2 | 4-hr) | | | | | |
| from date (dd/mm/yyyy) | | to date (de | d/mm/yyyy) | | | | | |
| Reason for dive (specify) | | | | | | | | |
| Diving method planned | | | | | | | | |
| All divers must clear the water minimum passing distance (r | | pefore the e | expected passing of a | ın appro | paching vess | el within the | specifie | d |
| Diving checklist | | | | | | | | |
| Divers' names | | | | Main o | contact telepl | none number | | |
| | | | | | · | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Tick whe | re applicable | | |
| All divers are certified to the relevant local and international standard | | | | | | | | |
| A diving checklist has been completed before diving activity starts | | | | | | | | |
| 3. Flags will be displayed in an appropriate location | | | | | | | | |
| 4. Vessels and terminal operators in adjacent berths have been fully briefed | | | | | | | | |
| 5. All diving operations will comply with and operate under AS/NZS 2299.1 (2015) | | | | | | | | |
| Indemnity and insurance | | | | | | | T: -1. 4- | c : |
| i.1. The Applicant confirms it performs the works within the Port of Geelong at its own risk and indemnifies Ports Victoria (including its officers, employees and agents) against all claims and losses sustained or incurred by any person, including in respect of: | | | | | | | | |
| contribution by Po | operty, arising direct of the Applicant or it rts Victoria). | ts contrac | tor (subject to a rec | duction | to the exte | nt of any | | |
| 6.2. The Applicant confirm from, or in any way on to third party beneficial from the confirmation of the c | onnected with, work | to be per | formed, and this in | surand | ce cover ex | tends | | |

| Marine Operations - Ports Victoria | Notification of Occupational Diving (Version 1 – June 2023) |
|------------------------------------|--|
| Tel: +61 3 5225 3565 | Printed copies are uncontrolled – refer to <u>www.vrca.vic.gov.au</u> for the latest version |



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Diving checklist

As the attending Supervisor:

- I will ensure that all persons engaged in this work, whether employed directly or on subcontract will execute their duties in a safe manner, and in accordance with the requirements of any approval provided and relevant standards
- I understand Port of Geelong Marine Control (Ports Victoria) may vary, alter or cancel an approval at any time.
- I must contact Port of Geelong Marine Control (Ports Victoria) before and after actual diving operations (on VHF Channel 12 or via telephone +61 3 5225 3565)
- I will check shipping traffic for the period and maintain watch for vessel movements in the immediate vicinity

| Dive Supervisor name and company | | |
|----------------------------------|-------------------|--|
| Permit number (if applicable) | Telephone | |
| Dive Supervisor signature | Date (dd/mm/yyyy) | |

| Port of Geelong MC use | | | |
|---------------------------|---|-------------------|--|
| Notification acknowledged | | | |
| | _ | | |
| | | | |
| Name | | Date (dd/mm/yyyy) | |

| Marine Operations - Ports Victoria | Notification of Occupational Diving (Version 1 – August 2023) |
|------------------------------------|---|
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