

# ENGINEERING SUPERVISOR'S CERTIFICATE

## PART A – AUTHORITY FOR ES TO ESTABLISH WORKSITE

Name of ES:		Staff No./Employer:	
Authority Given by PICOP (Name)			
Line(s) Affected:	UP	DOWN	Single
ES Boards Placed From <small>(Milepost)</small>		ES Boards Placed To <small>(Milepost)</small>	
Signed (ES):	Time:	Date:	

## PART B – AUTHORITY FOR TSC TO START WORK

TSC 1	Staff No/ Employer	Location	Affected Line(s)	Nature of work	Started		
					Time	Date	
Relieving TSC	Staff No/ Employer	Started		Relieving TSC	Staff No./ Employer	Started	
		Time	Date			Time	Date

### TSC HANDBACK

I certify the work is completed and the track is safe <i>(confirming technical handback per departmental instruction)</i> and clear <i>(all staff, plant and materials are off the line)</i> for the passage of trains <input type="checkbox"/>	<b>Finished</b>
or the work is continuing without reliance on the possession arrangements <input type="checkbox"/>	Time    Date
Signed by TSC:	

TSC 2	Staff No/ Employer	Location	Affected Line(s)	Nature of work	Started		
					Time	Date	
Relieving TSC	Staff No/ Employer	Started		Relieving TSC	Staff No./ Employer	Started	
		Time	Date			Time	Date

### TSC HANDBACK

I certify the work is completed and the track is safe <i>(confirming technical handback per departmental instruction)</i> and clear <i>(all staff, plant and materials are off the line)</i> for the passage of trains <input type="checkbox"/>	<b>Finished</b>
or the work is continuing without reliance on the possession arrangements <input type="checkbox"/>	Time    Date
Signed by TSC:	

TSC 3	Staff No/ Employer	Location	Affected Line(s)	Nature of work	Started		
					Time	Date	
Relieving TSC	Staff No/ Employer	Started		Relieving TSC	Staff No./ Employer	Started	
		Time	Date			Time	Date

### TSC HANDBACK

I certify the work is completed and the track is safe <i>(confirming technical handback per departmental instruction)</i> and clear <i>(all staff, plant and materials are off the line)</i> for the passage of trains <input type="checkbox"/>	<b>Finished</b>
or the work is continuing without reliance on the possession arrangements <input type="checkbox"/>	Time    Date
Signed by TSC:	

TSC 4	Staff No/ Employer	Location	Affected Line(s)	Nature of work	Started		
					Time	Date	
Relieving TSC	Staff No/ Employer	Started		Relieving TSC	Staff No./ Employer	Started	
		Time	Date			Time	Date

## TSC HANDBACK

I certify the work is completed and the track is safe (*confirming technical handback per departmental instruction*) and clear (*all staff, plant and materials are off the line*) for the passage of trains

or the work is continuing without reliance on the possession arrangements

Signed by TSC:

Finished	
Time	Date

TSC 5	Staff No/ Employer	Location	Affected Line(s)	Nature of work	Started		
					Time	Date	
Relieving TSC	Staff No/ Employer	Started		Relieving TSC	Staff No./ Employer	Started	
		Time	Date			Time	Date

## TSC HANDBACK

I certify the work is completed and the track is safe (*confirming technical handback per departmental instruction*) and clear (*all staff, plant and materials are off the line*) for the passage of trains

or the work is continuing without reliance on the possession arrangements

Signed by TSC:

Finished	
Time	Date

## PART C – CHANGE OF ES

Relieving ES:		Time:	Relieving ES:		Time:
Staff No/Employer:		Date:	Staff No/Employer:		Date:
Relieving ES:		Time:	Relieving ES:		Time:
Staff No/Employer:		Date:	Staff No/Employer:		Date:

## PART D – NOTIFICATION OF PICOP CHANGE

Relieving PICOP:		Time:	Relieving PICOP:		Time:
		Date:			Date:
Relieving PICOP:		Time:	Relieving PICOP:		Time:
		Date:			Date:

## PART E – COMPLETION OF WORK

I being the ES for the worksite certify that:

(A) The portion of the line affected by the work is now clear and safe for trains to pass.

(B) All marker boards have been lifted.

(C) Anyone remaining on or near the line has been told that working traffic may resume.

(Please Tick)




SIGNED:		Time:		Date:	
---------	--	-------	--	-------	--

**NOTE:** On completion, this form must be submitted to your Supervisor/Line Manger.