Complete this form to request a concession from existing HSEAA Process requirements. Please complete Section 1 to 4, and then send to the SEAA Branch Management Systems Team on [SEAABManagementSystems@watercorporation.com.au](mailto:SEAABManagementSystems@watercorporation.com.au)

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| **Section 1. Request** – *to be completed by the Contractor, Region and/or Alliance requesting the concession* | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | Role: | | | | | | | | | Site: |
| Name of the document from which concession is sought: | | | | | | | |  | | | | | | | | | |
| Define specific section or clause, including headings. | | *Transcribe the wording from the document to which the requested concession relates to.* | | | | | | | | | | | | | | | |
| Reason for the request :  *Explain why the HSEAA requirement cannot be met* | | *Provide background information in support of the requested concession* | | | | | | | | | | | | | | | |
| Propose alternative to meet the criteria:  *Describe advantages or disadvantages of the proposed alternative.* | |  | | | | | | | | | | | | | | | |
| *Detail the duration and location of the concession.* | | Permanent  Temporary | | | | Start date: | | | | Completion date: | | Comments: | | | | | |
| **Section 2. Alternatives considered -** *Detail the alternatives considered and exhausted before requesting the concession* | | | | | | | | | | | | | | | | | |
| Outline alternatives considered:  *Include details of impact of HSEAA risk/alternatives considered* | | |  | | | | | | | | | | | | | | |
| Proposed approach if concession is granted  *What is different? Have additional risks been introduced? How are they being controlled?* | | |  | | | | | | | | | | | | | | |
| **Section 3. Risk Assessment- Refer to** [**S389 Risk Assessment Criteria**](http://aqua/link/?doc=621047)  *Include details of the HSEAA impacts and risks for the proposed alternatives and controls allocated to reduce the risk to ALARP* | | | | | | | | | | | | | | | | | |
| **Activity** | **Hazard**  *What could harm workers?* | | | | | | **Initial Risk Rating** | | **Controls**  *What can be done to reduce the risk?* | | | | **Residual Risk Rating** | | **Further mitigation/actions**  *Required to reduce risk to ALARP* | | |
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| **List of documents that support the concession or that are affected by this concession:** (attach documents) | | | | | | | | | | | | | | | | | |
| Document title: | | | | | | | | | | | | | | | | | |
| Document title: | | | | | | | | | | | | | | | | | |
| Document title: | | | | | | | | | | | | | | | | | |
| **Section 4. Review and Submission –** *Local review of the request before submitting it to the SEAA Branch* | | | | | | | | | | | | | | | | | |
| ☐ Accepted  ☐ Accepted with comments  ☐ Rejected | | | | | Reviewer No.1 – SME/OSH Coordinator/ Environmental Coordinator’s signature:  *Insert Aqua link to email*  Date: | | | | | | Reviewer No.2 – Region Manager/ Site Manager/ Project Manager / Contract Manager’s signature:  *Insert Aqua link to email*  Date: | | | | | Comments or reason for rejection : | |
| **Section 5. Impact Assessment –** *to be completed by the SEAA Branch Section Manager* | | | | | | | | | | | | | | | | | |
| ☐ Safety | | | | | ☐ Health | | | | | | ☐ Environment | | | | | ☐ Aboriginal Affairs | |
| ☐ Financial | | | | | ☐ Quality | | | | | | ☐ Time | | | | | ☐Training | |
| ☐ People | | | | | ☐Equipment | | | | | | ☐Material | | | | | ☐ Other | |
| **Comments** | | | | | | | | | | | | | | | | | |
| **Section 6. Approval and Endorsement-** *Select type of concession to be considered Minor or Major, refer to* [*Management of concessions from HSEAA requirements Procedure*](http://aqua/link/?doc=15861029) *for further explanation.* | | | | | | | | | | | | | | | | | |
| **Minor Concession**  (Approval No. 1 and 2 signatures required) | | | | ☐ Accepted  ☐ Accepted with comments  ☐ Rejected | | | | Approval No.1 - SEAA Section Manager’s signature:  *Insert Aqua link to email*  Date: | | | | | | Approval No. 2 - Contract Manager/Project Manager/Regional Manager’s signature:  *Insert Aqua link to email*  Date: | | | |
| Must not :  Result in an increase in the risk of injury/illness or environmental impact | | | |
| Plus three of the following must apply:  Industry accepted approach  Intent of the requirement is being met  No additional controls are required  High level controls in place  Not known incidents   * Administrative or support process | | | |
| **Major Concession**  (All four approval signatures required) | | | | ☐ Accepted  ☐ Accepted with comments  ☐ Rejected | | | | Approval No. 3 - SEAA Branch Manager’s signature:  *Insert Aqua link to email*  Date: | | | | | | Approval No. 4 – General Group Manager’s Signature:  *Insert Aqua link to email*  Date: | | | |
| Additional instructions | | | |  | | | | | | | | | | | | | |
| Comments or reason for rejection | | | |  | | | | | | | | | | | | | |