

## OC-R-FO-608 Third Party Notification of Work in Proximity to Power Lines or Equipment

This Form Must be Completed Prior to Commencement of Work in Proximity to API Energized Power Lines or Equipment

Applicant Inform	nation:							
Third Party Name:					TPN Number: (To be provided by API)			
Company Mailing Address:						Phone Number:		
Date(s) that Thi	rd Party and	/or Equipm	ent will be W	orking	in Pro	oximity of E	nergiz	zed Apparatus:
From: Date:		Time:		To:	Date			Time:
Description of p	etch if necessa	ry):				Sketch is attached:		
							·	
Work Site Inform	mation:							
Work Site Address:								
Name of Third Party or Designate:								
Work Site Phone Nu								
Description of Energized Power Lines and/or Equipment in proximity to proposed work site:								
Line-to-Line Voltage:			Feeder No. (if applicable):					
List required barriers or controls to meet minimum safety requirements (detail responsibility and status on Page 2):								
Construction work may only commence in accordance with API requirements as described on this OC-R-FO-608 Third Party Notification of Work in Proximity to Power Lines or Equipment form.  Note: Algoma Power Inc. (API) has provided this OC-R-FO-608 Third Party Notification of Work in Proximity to Power Lines or Equipment to the third party as a means of communicating certain minimum safety requirements relating to work carried out in proximity to energized power lines and/or equipment. Any controls or barriers to meet these minimum requirements must be in place before work may proceed. The third party is responsible for and assumes all liability in connection with the work including compliance with the minimum requirements noted. API assumes no responsibility or liability in connection with the work. Further, the third party hereby indemnifies API and its employees, officers, and directors in connection with any claims arising from the work.								
Date:			ууу	/y/mm/d	ld			
Presented by:								
Received and Accepted by:	API Repre				itle			Signature
Т	hird Party Authori	zed Representa	ative	Ti	itle			Signature



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installation of	r required Barri	ers or Controls:								
Third Party Name:				Form Number: (To be provided by API)						
Company Mailing Address:				Phone Number:						
The following works are required before Third Party may proceed with the Project near to or adjacent to Algoma Power lines.										
No.	Required	Action	Respons	Responsible Party						
Date:			yyyy/mm/dd							
Presented by:										
API Rep		entative	Title		Signature					
Accepted by:	Third Party Authoriz	red Representative	Title		Signature					
Removal of Barriers or Controls:										
On the date noted below, the Third Party certifies that all works in proximity to energized power lines/ equipment are complete. All previously installed barriers and controls have been removed by API and/or the Third Party.  **Forward final copies of form to the HS&E Department for file retention										
Date:			yyyy/mm/dd							
	API Repres	entative	Title		Signature					
	Third Party Authoriz	red Representative	Title	_	Signature					