Plantroom Access Request form

|  |  |
| --- | --- |
| **NAME:** |  |
| COMPANY (if not Oxford University staff): |  |
| UNIVERSITY CARD NUMBER if applicable: |  |
| DATE & TIME ACCESS TO START: |  |
| DATE & TIME ACCESS TO EXPIRE:  |  |
| AREA TO BE ACCESSED: |  |
| SCOPE OF WORKS:NB – Please note if access required as departmental fire officer |  |
| NAME & CONTACT DETAILS OF MEMBER OF UNIVERSITY STAFF ORGANISING WORKS: |  |
| CONTACT DETAILS OF CONTRACTOR: |  |

By requesting this authorised access you are confirming that:

* appropriate risk assessments, method statements and risk controls are in place for the work;
* your staff/contractors undertaking the work are competent;
* you will provide any necessary local site induction (covering fire and first aid arrangements as a minimum);
* your staff/contractors will have a suitable Site Contact for the period of the work;
* the relevant requirements of the University’s health and safety policies will be complied with; and
* after the work is complete, the work space will be left safe to occupy again, with all generated waste appropriately removed.

To view the University policy on protection of personal data please refer to our privacy notice for staff and contractors, which can be found here:

<https://www.admin.ox.ac.uk/councilsec/compliance/gdpr/privacynotices/staff/>

|  |  |
| --- | --- |
| **Signature of Requestor/Authoriser:** **Once completed please scan to DLO Helpdesk for action** **dlo.accessrequest@admin.ox.ac.uk** | **Date:** |
|  |  |
| **Signature of Contractor collecting fob:** **Note – contractors must return fob at the end of the works otherwise a charge may be levied** | **Date:** |
|  |  |
| Initials from DLO Helpdesk to confirm;Receipt of fobPaperwork scanned and savedAccess system updated |  |