

# Overhead Lines Close Approach Request



Please forward details no later than **4 working days** before work is due to commence.

If you need to work **closer than 4 metres** to our overhead power lines, you will need to complete the Overhead Line Close Approach Request Form.

Consent Number: \_\_\_\_\_

Applicant Details					
Company:					
Postal Address:					
Email Address:		Phone No:			
Worksite Location:					
Work From Date (max 30 days <sup>1</sup> ):		To (date):			
Hours of Work (daily):		Pole No. (if applicable):			
Details of work to be undertaken:					
Site Supervisor: <sup>2</sup>		Mobile No:			
Signature:		Date:			
<sup>1</sup> Work duration must not exceed 30 calendar days. A new approval will be required for each subsequent 30 day period <sup>2</sup> Name of person in charge of site works and on-site at all times					
Please download and read our "guide for working safely" which is available free from our website <a href="https://www.auroraenergy.co.nz/safety/">https://www.auroraenergy.co.nz/safety/</a>					
<b>In an Emergency – Do Not Move Man or Machinery</b> <b>Call: 0800 23 00 99</b> <b>Immediately!</b>					
Excavating Near Poles					
Excavating Near Poles?		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
MAX depth within 2.2m – 300mm		MAX depth between 2.2m to 5m - 750mm		<b>Note NO Close Approach Allowed for RED Tag Poles</b>	
Minimum Clearances					
The following minimum clearances from overhead lines must be maintained with permit:					
Line Voltage:	230 / 400V	6,600V	11,000V	33,000V	66,000V
Minimum Clearance:	1.0m	1.5m	1.5m	2.0m	3.0m

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Office Use					
Voltage/Clearance	230 / 400V (min 1.0m)	6,600V (min 1.5m)	11,000V (min 1.5m)	33,000V (min 2.0m)	66,000V (min 3.0m)
Circuit ID:					
Office Use					
Cover up gear?	<input type="checkbox"/> Yes		<input type="checkbox"/> No		
Safety Observer?	<input type="checkbox"/> Yes		<input type="checkbox"/> No		
Name:					
Signed:			NOC / FSP Advised (date):		
Field Service Provider Use					
Cover up gear booked?	<input type="checkbox"/> Yes		<input type="checkbox"/> No		
Safety Observer booked?	<input type="checkbox"/> Yes		<input type="checkbox"/> No		
Name:					
Signed:			NOC Advised (date):		
Office use					
Approved:	<input type="checkbox"/> Yes		<input type="checkbox"/> No		
Name:					
Signed:			Applicant Advised (date):		
Safety Measures on:		From (date):		To (date):	

Please click submit or email this form to: [closeapproach@auroraenergy.nz](mailto:closeapproach@auroraenergy.nz)