|          | DDE  | Critical Facilities Method Statement         |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|----------|--|--|----------------------|-----------------|-----------|---|-----------------|--------------------|-----------------|-------------|------------|----|------------|---------------------------|---------|---|---|--|--|
| CBRE     |  | Site:  |                      |                 |           |   |                 |                    |                 | Change ID:  |            |    |            |                           |         |   |   |  |  |
|          |  | System:                                      |                      |                 |           |   |                 |                    | Request Date:   |             |            |    |            |                           |         |   |   |  |  |
|          |  | Location:                                    |                      |                 |           |   |                 |                    | Supervisor:     |             |            |    |            |                           |         |   |   |  |  |
|          |  | Details:                                     |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| Form O   | wner:  | Contractors perform                          | ing Works            |                 | :e /      | / Times                                       |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          |  | Company                                      | Contact Phon         |                 | ne No.    |   | Scope           |                    | Start           |             |            |    | Finish     |                           |         |   |   |  |  |
| Revised  |  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   | _ |  |  |
|          |  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| Ref      |  |  | Critical S           | Service         | Risk      | An  | alysis          |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 1.0      | Business risk anal   | ysis for services included in scope Location |                      |                 |           |   |                 |                    | Risk            |             |            |    |            | Impact                    |         |   |   |  |  |
| 1.1      |  |  |                      |                 |           |   |                 |                    | High/Medium/Low |             |            |    |            | High/Medium/              |         |   |   |  |  |
| Ref      | Controls   |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 2.0      | Detail Controls which will be put in place to mitigate risk  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 2.1      |  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | Works will only be performed under an approved change order.   |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| Ref      |  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 3.0      | Detailed Procedur  | e of works to be perfo                       | ormed                |                 |           |   |                 |                    |                 |             |            |    |            | S                         | Ð       |   |   |  |  |
|          |  |  |                      |                 |           |   |                 |                    |                 |             |            | ks |            | <b>Handling Materials</b> | cranage |   |   |  |  |
|          |  |  | Timing               |                 |           |   | Nor             |                    | late            |             |            |    |            |                           |         |   |   |  |  |
|          |  |  | (h                   | ing             | uo        | llic  | rks             | ng N               | and             | evel        |            |    |            |                           |         |   |   |  |  |
|          |  |  |                      |                 | Switching | Isolation                                     | Hydraulic Work  | Hot works          | ndlii           | Lifting and | High Level |    |            |                           |         |   |   |  |  |
|          |  |  |                      |                 | Š         | Iso   | Ĭ               | Hot                | Hai             | Lif         | Hig        |    |            |                           |         |   |   |  |  |
|          | Sign into site   |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | Carry out tool box to<br>Contractors team me   | or the                                       |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | planned activity   | or the                                       |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | Notify GAM and Cha cagbsdglobalalarmm  | m  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | cagoodgiobalalariiii   | una di   | DOD ONG! IGHTCENG!   | TCCTITICSTITICS | cquarr    |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 3.1      |  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 3.1      |  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          |  | to fully automatic / norm                    |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | Notify GAM and Cha   | essful,                                      |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | unsuccessful, etc. <a href="mailto:cagbsdqlobalalarmmon@macquarie.com">cagbsdqlobalalarmmon@macquarie.com</a> BSDChqMqmtEngineerin@macquarie.com  Issue service report to CBRE engineer – Service reports by email must have clear file name |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
|          | Issue service report<br><i>Location – Level – E</i>  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| Ref      | Services Impacts   |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 4.0      |  |  |                      |                 |           |   |                 |                    | From            |             |            |    |            | Т                         | О       |   |   |  |  |
| 4.1      |  |  |                      |                 |           |   |                 |                    |                 |             |            |    |            |                           |         |   | _ |  |  |
| Ref      |  |  | Supp                 | lement          | ary F     | orn   | ns              |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| 5.0      | Include these For  | ms if high risk item ha                      |                      |                 |           |   |                 | ired)              |                 |             |            |    |            |                           |         |   |   |  |  |
| 5.1      | Switching  | Switching Proc                               | edure                | Ī               | 5.6       | Lift  | ting or Crangea | age                | Lifting pl      | an          |            |    |            |                           |         |   |   |  |  |
| 5.2      | Isolation  | Isolation Proce                              | edure                |                 | 5.7       | Hig   | gh Level        | Safe Access Plan   |                 |             |            |    |            |                           |         |   |   |  |  |
| 5.3      | Water Pipes  | Isolation and o                              | or Hydrostatic Test  | Report          | 5.8       | Ch  | emicals         | Material Safety Da |                 |             |            |    | ata Sheets |                           |         |   |   |  |  |
| 5.4      | Hot Works  | Hot works Perr                               | mit (spotter require | ed)             | 5.9       | Saf   | fety Procedure  |                    | Risk Assessment |             |            |    |            |                           |         |   |   |  |  |
| 5.5      | Handling Materials   | Materials hand                               | ling plan            |                 | 5.10      | 0 Safety Procedure Safe Work Method Statement |                 |                    |                 |             |            |    |            |                           |         |   |   |  |  |
| Agreed a | nd Signed off Contrac  | tor:   |                      | Prin            | t Name    | e:  |                 |                    | Date:           |             |            |    |            |                           |         | - |   |  |  |
| Agreed a | nd Signed off Supervi  | Print Name:                                  |                      |                 |           |   |                 | Date:              |                 |             |            |    |            |                           | -       |   |   |  |  |
| Agreed a | nd Signed off MGL En   | Print Name:                                  |                      |                 |           |   |                 | Date:              |                 |             |            |    |            |                           |         |   |   |  |  |