

Diving Project Plan	Annex 1
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Location: NAME, lat/long
Dates of Dives: dates or duration (max. 1 year)
Maximum Depth:

Work Plan Code: identifier & date
Principal Investigator:
Project Code:

Named Diving Contractor:	
Diving Contractor Address:	Diving Contractor Contact Details
	Tel:
	Fax:

Diving Project Description:

An outlay of the whole diving project, the type and number of team required for the whole project and any special equipment that may be used (e.g. Nitrox, diving from RVs etc.). The Work Plan must be sub-divided into separate Diving Operations which are capable of being supervised by a single supervisor.

Diving Operations:	
Diving Operation Description	RA Code
1.	
2.	
3.	
4.	
5.	
6.	

Overall Associated Risk:	Rating	
Give an overall assessment of the Dive Project – (there is no rating system above this)		

Emergency Considerations:
1. State how, in an emergency, the diver will be retrieved
2. State what the on-site treatment will be
3. State how transfer for on-going treatment will be achieved
4. State what the contact details for the emergency services are

Risk assessments checked on behalf of the Diving Contractor by:
_____ (print name) _____ (position)
_____ (signature) ____/____/____ (date)