

Scope of Work

Document Number :	
DPK1/PC-XX/GFO/0006	
Issue Date	09 October 2024
Revision	1

IPP 2 PLTU KENDARI-3

Plant	PT DSSP Power Kendari	Department	HSE
Equipment Name	CEMS	Equipment KKS Code	
Area	CEMS Shelter	Unit	Unit #1 and #2

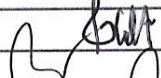



Project Title Description

Response Correlation Audit (RCA) CEMS 2026

New Modification Replace Repair Service PM Training Calibration Others _____

No	Specific Scope of Works	Quantity	Remarks
1	Performance test for RCA CEMS unit with parameter Particulate Matter (PM)	1 Ls	All Documents must be submitted in the attachment of the quotation. Documents submitted to DSSP are CV/Resume of each personnel including a valid certificate. Refer to DSSP/DDPI/TECH/001 "Regulation of DDPI Regarding O&M Outsourcing Service Work".
2	Requirement Document (Before Work) 1. Certificate of KAN Accreditation 2. Certificate of Instrument Calibration (The last one year) 3. Certificate of Operator Competence (Air Sampling) After Work 1. Certificate of Analysis (Soft & Hardcopy 2 Set) 2. Report (Soft & Hardcopy 2 Set)	1 Ls	All documents ,Daily Report, Service Report, Recommendation Report, BAST, Etc must be submitted to DSSP

No	Work Description	Common Scope of Work	Remarks																		
1	General Scope	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Cleaning working area after finish</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Operational training for new equipment</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Warranty of Product/Work</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>General Lighting</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Portable Lighting</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Cover all security</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> </table>	Cleaning working area after finish	<input checked="" type="checkbox"/>	Operational training for new equipment	<input checked="" type="checkbox"/>	Warranty of Product/Work	<input checked="" type="checkbox"/>	General Lighting	<input checked="" type="checkbox"/>	Portable Lighting	<input checked="" type="checkbox"/>	Cover all security	<input checked="" type="checkbox"/>							
Cleaning working area after finish	<input checked="" type="checkbox"/>																				
Operational training for new equipment	<input checked="" type="checkbox"/>																				
Warranty of Product/Work	<input checked="" type="checkbox"/>																				
General Lighting	<input checked="" type="checkbox"/>																				
Portable Lighting	<input checked="" type="checkbox"/>																				
Cover all security	<input checked="" type="checkbox"/>																				
2	Temporary Facility Scope	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Accommodation / Dormitory</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Mob and de-mob manpower</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Mob and de-mob tool and equipment</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Local transportation for manpower, material, equipment</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Meal & Drinking</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Site offices & rest shelter</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Scaffold installation and dismantle</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Secure site - Safety Inspector facilities</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> </table>	Accommodation / Dormitory	<input checked="" type="checkbox"/>	Mob and de-mob manpower	<input checked="" type="checkbox"/>	Mob and de-mob tool and equipment	<input checked="" type="checkbox"/>	Local transportation for manpower, material, equipment	<input checked="" type="checkbox"/>	Meal & Drinking	<input checked="" type="checkbox"/>	Site offices & rest shelter	<input checked="" type="checkbox"/>	Scaffold installation and dismantle	<input checked="" type="checkbox"/>	Secure site - Safety Inspector facilities	<input checked="" type="checkbox"/>			
Accommodation / Dormitory	<input checked="" type="checkbox"/>																				
Mob and de-mob manpower	<input checked="" type="checkbox"/>																				
Mob and de-mob tool and equipment	<input checked="" type="checkbox"/>																				
Local transportation for manpower, material, equipment	<input checked="" type="checkbox"/>																				
Meal & Drinking	<input checked="" type="checkbox"/>																				
Site offices & rest shelter	<input checked="" type="checkbox"/>																				
Scaffold installation and dismantle	<input checked="" type="checkbox"/>																				
Secure site - Safety Inspector facilities	<input checked="" type="checkbox"/>																				
3	HSE Concern Scope	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>First aid & Medical for worker</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>BPJS Certificate & MCU (Last 1 year) or Health Certificate from the Community Health Center</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Fire fighting equipment (Extinguisher)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>General Safety PPE (Safety Shoes, Safety Helmet with Chin Strap, Uniform with Scothlight/Safety Vest, Mask)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Specific Safety PPE & Tools basen on activity</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Safety Officer (minimum AK3 Umum - Kemnaker)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Certification manpower (GTAW, SMAW, Scaffolder, Inspector Scaffolding, High working, SIO, Radiografer, Confined Space, Diver)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Certification/Training K3 (PJK3/Ministry of Manpower)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Manpower identity (KTP) & valid license (SIM & STNK) *if use Vehicle</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> </table>	First aid & Medical for worker	<input checked="" type="checkbox"/>	BPJS Certificate & MCU (Last 1 year) or Health Certificate from the Community Health Center	<input checked="" type="checkbox"/>	Fire fighting equipment (Extinguisher)	<input checked="" type="checkbox"/>	General Safety PPE (Safety Shoes, Safety Helmet with Chin Strap, Uniform with Scothlight/Safety Vest, Mask)	<input checked="" type="checkbox"/>	Specific Safety PPE & Tools basen on activity	<input checked="" type="checkbox"/>	Safety Officer (minimum AK3 Umum - Kemnaker)	<input checked="" type="checkbox"/>	Certification manpower (GTAW, SMAW, Scaffolder, Inspector Scaffolding, High working, SIO, Radiografer, Confined Space, Diver)	<input checked="" type="checkbox"/>	Certification/Training K3 (PJK3/Ministry of Manpower)	<input checked="" type="checkbox"/>	Manpower identity (KTP) & valid license (SIM & STNK) *if use Vehicle	<input checked="" type="checkbox"/>	
First aid & Medical for worker	<input checked="" type="checkbox"/>																				
BPJS Certificate & MCU (Last 1 year) or Health Certificate from the Community Health Center	<input checked="" type="checkbox"/>																				
Fire fighting equipment (Extinguisher)	<input checked="" type="checkbox"/>																				
General Safety PPE (Safety Shoes, Safety Helmet with Chin Strap, Uniform with Scothlight/Safety Vest, Mask)	<input checked="" type="checkbox"/>																				
Specific Safety PPE & Tools basen on activity	<input checked="" type="checkbox"/>																				
Safety Officer (minimum AK3 Umum - Kemnaker)	<input checked="" type="checkbox"/>																				
Certification manpower (GTAW, SMAW, Scaffolder, Inspector Scaffolding, High working, SIO, Radiografer, Confined Space, Diver)	<input checked="" type="checkbox"/>																				
Certification/Training K3 (PJK3/Ministry of Manpower)	<input checked="" type="checkbox"/>																				
Manpower identity (KTP) & valid license (SIM & STNK) *if use Vehicle	<input checked="" type="checkbox"/>																				
4	Consumables & Tool Scope	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Consumable (waq cotton, insulation tape, etc.)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Crane/winchs or other lifting equipment</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Compressed air sources</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Water resources</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Electrical resources</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Special work tools (inspected)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Certification Analysis/Calibration Laboratory (KAN)</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> </table>	Consumable (waq cotton, insulation tape, etc.)	<input checked="" type="checkbox"/>	Crane/winchs or other lifting equipment	<input checked="" type="checkbox"/>	Compressed air sources	<input checked="" type="checkbox"/>	Water resources	<input checked="" type="checkbox"/>	Electrical resources	<input checked="" type="checkbox"/>	Special work tools (inspected)	<input checked="" type="checkbox"/>	Certification Analysis/Calibration Laboratory (KAN)	<input checked="" type="checkbox"/>					
Consumable (waq cotton, insulation tape, etc.)	<input checked="" type="checkbox"/>																				
Crane/winchs or other lifting equipment	<input checked="" type="checkbox"/>																				
Compressed air sources	<input checked="" type="checkbox"/>																				
Water resources	<input checked="" type="checkbox"/>																				
Electrical resources	<input checked="" type="checkbox"/>																				
Special work tools (inspected)	<input checked="" type="checkbox"/>																				
Certification Analysis/Calibration Laboratory (KAN)	<input checked="" type="checkbox"/>																				
5	Health, Safety, Environment & Energy Policy	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>HSE Requirement Form</td><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Document No. DPK1/HS-XX/GFO/0053</td></tr> <tr><td>Follow DSSP Procedure of Hazardous and Non-B3 Waste Management</td><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Document No. DPK1/HS-XX/SOP/0003</td></tr> <tr><td>Follow DSSP Domestic Waste Management</td><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Document No. DPK1/HR-XX/WIP/0001</td></tr> <tr><td>Follow DSSP Energy Policy and Management System Requirement</td><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Document No. DPK1/MG-XX/SOP/0007</td></tr> </table>	HSE Requirement Form	<input checked="" type="checkbox"/>	Document No. DPK1/HS-XX/GFO/0053	Follow DSSP Procedure of Hazardous and Non-B3 Waste Management	<input checked="" type="checkbox"/>	Document No. DPK1/HS-XX/SOP/0003	Follow DSSP Domestic Waste Management	<input checked="" type="checkbox"/>	Document No. DPK1/HR-XX/WIP/0001	Follow DSSP Energy Policy and Management System Requirement	<input checked="" type="checkbox"/>	Document No. DPK1/MG-XX/SOP/0007							
HSE Requirement Form	<input checked="" type="checkbox"/>	Document No. DPK1/HS-XX/GFO/0053																			
Follow DSSP Procedure of Hazardous and Non-B3 Waste Management	<input checked="" type="checkbox"/>	Document No. DPK1/HS-XX/SOP/0003																			
Follow DSSP Domestic Waste Management	<input checked="" type="checkbox"/>	Document No. DPK1/HR-XX/WIP/0001																			
Follow DSSP Energy Policy and Management System Requirement	<input checked="" type="checkbox"/>	Document No. DPK1/MG-XX/SOP/0007																			

REMARKS	<input checked="" type="checkbox"/>	Vendor Scope	<input checked="" type="checkbox"/>	Not Vendor Scope	Not Applicable
		Position		Name	Signature
Proposed By		User		Clara Christy Aldetha P	
Reviewed By		Direct Supervisor		Fariq Lainufar	
		HSE		Fariq Lainufar	
		Manager Energy		Fery F	

Date
24/02/2026
24/2/26
24/2/26