

**SAFE WORK PERMIT**

Date: \_\_\_\_\_

**Supervisor Audit:***(This section for office use only)***Emergency Notification:**

(telephone number required)

Supervisor Signature \_\_\_\_\_

Date: \_\_\_\_\_

Annual Safety Audit:

Date: \_\_\_\_\_

Safety Specialist Signature: \_\_\_\_\_

**A. WORK REQUEST****(COMPLETE THIS SECTION FOR ALL PERMITS)**

1. Permit Type:  Hot Work  Confined Space Entry (see side 2)  Excavation  
 Vehicle Access  Hot Tap (See Hot Tap Guidelines)  Other (specify): \_\_\_\_\_
2. Facility Name: \_\_\_\_\_ Location of Work: \_\_\_\_\_
3. Work To Be Undertaken: \_\_\_\_\_
4. Company(s) Conducting Job: \_\_\_\_\_
5. Task/Entry Supervisor: \_\_\_\_\_ 6. Number in Work Party: \_\_\_\_\_

**B. HAZARDS IDENTIFICATION****(COMPLETE THIS SECTION FOR ALL PERMITS)**

7.  Hazardous Atmospheres  Trapped Pressure  Dangerous Chemicals  Electricity  
 Open Flames or Arcs  Crane Operation  Adjacent Operations  Heavy Loads  
 Flying Particles or Sparks  Danger of Falling  Excavation Collapse  Noise  
 NORM or other Radiation  Moving Machinery  Weather Hazards  Insects/snakes  
 Temperature Extremes  Overhead Hazards  Flammables/Combustibles/Explosives  Engulfment  
 Safety Systems bypassed/disabled  Other: \_\_\_\_\_

**C. WORK PREPARATION****(COMPLETE THIS SECTION FOR ALL PERMITS)**

8. Electrical Equipment is:  De-energized  Locked  Tagged  Verified Safe  N/A
9. Vessels/Piping are:  Depressurized  Disconnected  Blinded  Double Blocked & Bled  N/A  
 Flushed  Inert Gas Purged  Ventilated (equipment bonded?)  N/A
10. Valves Are:  Closed  Locked  Tagged  Blinded  N/A  
 Removed  Open (if necessary for safe work - ie bleed valve, open drain, etc.)  N/A
11. Equipment/Machinery/Energy Sources Secured From Unexpected Movement or Start-up?  Yes  N/A
12. Additional Lighting Required?  Yes  N/A

**D. REQUIRED PROTECTIVE APPAREL/EQUIPMENT (COMPLETE THIS SECTION FOR ALL PERMITS)**

13.  Hard Hat  Safety Glasses w/Sideshields  Tinted Lenses  Goggles  Faceshield  
 Welding Hood  Cutting Glasses  Hearing Protection  FR Hood  Insulate Hood  
14.  Gloves:  Chemical Resistant  Heat Resistant  Cotton  Dielectric  
15.  Protective Footwear:  Safety Toe Shoes or Boots  Chemical Resistant Safety Toe Boots  Boot Covers  
16.  Respiratory Protection:  N/A  Hose Line with Escape Unit  SCBA  
 Chemical Cartridge: Type: \_\_\_\_\_  Dust/Mist  HEPA Filter  
17.  Protective Clothing:  Normal  Flame Resistant  Water/Chemical Resistant  Disposable  
18.  Safety Harness:  N/A  Retrieval Line  Vertical Retrieval Device  Lanyard  
19.  Personal H<sub>2</sub>S Monitor  Multi-Function Monitor  N/A  Other: (specify) \_\_\_\_\_

**E. EMERGENCY PREPAREDNESS****(COMPLETE THIS SECTION FOR ALL PERMITS)**

20. Is Fire Fighting Equipment Readily Available, In Good Condition, Recently Inspected?  Yes  N/A
21. Is a Fire Watch Needed?  Yes  N/A If Yes, Name(s): \_\_\_\_\_
22. Is Emergency Equipment Readily Available, In Good Condition, Recently Inspected?  Yes  N/A
23. Are Rescue Provisions Determined?  Yes Specify: \_\_\_\_\_  N/A

**F. ATMOSPHERIC MONITORING (attach extra forms as needed) (COMPLETE THIS SECTION FOR ALL PERMITS)**

Record Actual Readings	Oxygen 19.5% - 23.5 %	LEL Hot work 0% Entry < 10%	H <sub>2</sub> S < 10 ppm	Other	NORM (if applicable)	Time	Initials
24. Initial Check							
Recheck							
Recheck							
Recheck							

25.  Continuous Monitoring Required or  Periodic Monitoring Required Every \_\_\_\_\_ Minutes

**G. EXCAVATIONS****(COMPLETE THIS SECTION FOR ALL EXCAVATIONS THAT PERSONNEL WILL ENTER)** Applicable  N/A**(TO BE COMPLETED BY "COMPETENT PERSON" ONLY)**

26. Is excavation 4 or more feet deep?  Yes (Attach Excavation Inspection Checklist)  No (proceed to next question)
27. Does excavation have a potential to cave-in on personnel who will be working in the excavation?  
 If YES -  Excavation must be protected against cave-in. If NO -  Work may proceed.

**H. ADDITIONAL PERMIT CONDITIONS AND OTHER HAZARDS NOT PREVIOUSLY LISTED**

28.  Applicable  Non- Applicable Specify: \_\_\_\_\_

**I. ISOLATION VERIFICATION**

(Verified by Task Supervisor)

**(COMPLETE THIS SECTION FOR ALL PERMITS)**

29. Process/Mechanical Isolations  
 Applicable (Multiple-Isolation Log Attached)  N/A  
 All relevant systems have been isolated and locked and tagged out in accordance with Three Way, Inc. policy.
30. Electrical Isolations  
 Applicable (Multiple-Isolation Log Attached)  N/A  
 All relevant systems have been isolated and locked and tagged out in accordance with Three Way, Inc. policy.

**J. WORKER BRIEFING - \* Must Brief Workers on All Items \* (COMPLETE THIS SECTION FOR ALL PERMITS)**

31. All members of the work party have been briefed on:  Potential Hazards  Safe Work Procedures  
 Conditions of the Permit  Emergency Action/Rescue  Means of Egress and Muster Area