

CONFINED SPACE ENTRY PERMIT

PERMIT DATE: _____	PERMIT DURATION: _____ a.m. _____ a.m. Start: _____ p.m. Stop: _____ p.m.
LOCATION OF ENTRY: _____	
PURPOSE OF ENTRY: _____	

A. PRE-ENTRY CONTROL MEASURES	Yes	No	NA
1. Have all appropriate shut down procedures been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is electrical power locked out and tagged out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have fuel system lines been isolated, capped, blocked, or locked and tagged out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Have all steam lines been isolated, capped, blocked, or locked and tagged out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Have water lines been isolated, capped, blocked, or locked and tagged out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Have nitrogen/gas lines been isolated, capped, blocked or locked and tagged out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Has the confined space been adequately purged, flushed and ventilated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Is the confined space cooled down to ambient temperature?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Will any hot work operations be performed in the confined space?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Has proper lighting and electrical supply been provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Has the confined space been barricaded from pedestrian and/or vehicle traffic?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. SAFETY EQUIPMENT INVENTORY	Yes	No
1. Entrant(s) equipped with safety harnesses and lifelines?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is respiratory protection required?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is eye protection required?	<input type="checkbox"/>	<input type="checkbox"/>
4. Is hand protection required?	<input type="checkbox"/>	<input type="checkbox"/>
5. Is protective clothing required?	<input type="checkbox"/>	<input type="checkbox"/>
6. Is head protection required?	<input type="checkbox"/>	<input type="checkbox"/>
7. Is noise protection required?	<input type="checkbox"/>	<input type="checkbox"/>
8. Is fire protection equipment available?	<input type="checkbox"/>	<input type="checkbox"/>
9. Communications available for entrants/attendants/	<input type="checkbox"/>	<input type="checkbox"/>
10. Is GFI protection available for electrical equipment?	<input type="checkbox"/>	<input type="checkbox"/>

C. ATMOSPHERE TESTING
Oxygen Content: _____ %
Lower Explosive Limit (LEL): _____ %
Carbon Monoxide (<35 PPM): _____ PPM
Other Toxins: _____
Instrument Used: (mfg/model/serial number) _____
Time tested: _____ am/pm
Date tested: _____
Tested by: _____
Department: _____

ENTRY AUTHORIZATION			
This permit is valid only when the applicable items are completely filled out and while all requirements as identified above are in compliance. This permit is valid only for the date and duration indicated, and the job and location indicated.			
Entry Supervisor: _____	Date: _____	Entrant #3: _____	Date: _____
Entrant #1: _____	Date: _____	Entrant #4: _____	Date: _____
Entrant #2: _____	Date: _____	Attendant: _____	Date: _____

CONFINED SPACE ENTRY PROCEDURES

This permit is to be used when entering a permit-required confined space. The following information is a brief summary of the confined space entry procedures. For complete procedures, refer to Operating Procedure EHS.003. No confined space entry shall begin until a confined space entry permit has been issued. Any exceptions to this procedure must be authorized by the EH&S Department.

1. An entry supervisor shall personally issue the permit after inspecting the area and reviewing the hazards and verifying that appropriate control measures are in place.
2. Whenever a confined space entry directly affects another employees work area, the supervisor of the affected work area shall be notified and required to sign the permit.
3. The permit is valid only for the date and duration indicated. No permit will be issued for longer than one work shift.
4. All employees who are entering the confined space shall review the permit and if appropriate control measures are in place, the entrants must sign the permit.
5. All employees who are entering the confined space must be trained in this procedure.
6. Before entry, all piping and lines shall be disconnected or blinded/blanked.
7. All machinery and electrical equipment must be locked out/tagged out.
8. Before entry, the space must be cleaned and properly ventilated.
9. Atmospheric test shall be conducted prior to entry and continuously for the duration of the entry. The atmosphere must be tested for oxygen content, % LEL/LFL, and for any known contaminants.

Acceptable Limits:

Oxygen:	>19.5% to < 23.5%
%LEL/LFL:	<10% of Lower Flammable Limit
Carbon Monoxide:	< 35 parts per million (PPM)
Toxicity:	Below acceptable exposure TLV

10. A properly trained and equipped attendant shall be continuously present for the duration of the entry. The attendant has the authority to terminate the entry if conditions in or around the space presents a hazard to the entrants.
11. The permit must be post at the confined space for the duration of the entry.
12. After the work has been completed or if the work extends beyond the permit duration, the entry supervisor will terminate the permit. If the work is not completed, a new permit must be issued.
13. Return all permits to the department originating the entry, after termination, for filing. These permits must be kept on file for a minimum of 1 year.

THIS PERMIT MUST BE POSTED AT THE ENTRY SITE FOR THE DURATION OF THE ENTRY