Hot Work Permit 12/20/2016

Document Start & Stop Times on Back Page or Use a Separate Multi-Shift Log

New Hot Work Logs and Permit Forms are available on Docushare

Location

Permit Owner/Project Manager

Date Issued

Tvr	e of	Long-Term			Multi-Shift			
	mit			П	Single Shift			
		I						
	Mult	iple Shift Permit To Start (date & shift):		То	End (date & shift):			
Per	iod:	shifts						
Nat	ture	of Job	Burning		☐ Grinding			
		tion:	- w					
	,cp							
Spe	eciai	Instructions:						
١								
ш	High	Risk Third Party Authorization (signed)						
	Λ	DANGER do not cut, weld or grind unt	TII TUE	EOL	OWING DECAUTIONS HAVE BEEN TAKEN			
4		DANGER DONOI COI, WELD OR GRIND ON	IIL INC	FUL	LOWING PRECAUTIONS HAVE BEEN TAKEN			
Apply	Verified	✓ all that apply; also ✓ when verified by inspection of location	Apply	Verified	✓ all that apply; also ✓ when verified by inspection of location			
Ap	Veri	& precautions taken to prevent fire or combustion	Ар	Veri	& precautions taken to prevent fire or combustion			
1		Fire extinguishers - ample extinguishing provisions	√		Fire Watch 30-minute minimum, or			
	Ц	for immediate use		Ц	additional minutes, after completion of work.			
		Detector / sprinklers operable			Safety Watch			
		Fire suppressant system operable	✓		Equipment in good repair			
		Alarm / extinguishing system disablement			Ventilation			
		Combustibles			Floors clean & wet			
		Combustibles 35' from job and/or protected			Openings within 35' covered tightly			
		Flammable gasses			Confined space			
		Flammable liquids	✓		Exits			
		Un-purged tanks			Shaft spark barriers			
1		Work area <u>examined</u> & <u>limited</u> to location described	✓		Document Job Initiation in Hot Work Log			
		on permit	✓		Document Job Completion in Hot Work Log			
		Other considerations (specify):						
<u>L</u>								
DAL	DALeignetuse				Permit #			
PAI	signa	ture		_ rer	mit #			

Permit Owner signature & date			
Hot Work Policy stipulations for Multiple Shift Pe to review and sign the permit may require multip	•	-	-
required, see front of this permit) Safety Watch.	Multiple signature/info	ormation boxes are	provided below.
Fire Watcher – is assigned, has communication & knows ho	w to give alarm. Name:		
Safety Watch (if required) Name:			
Hot Work Lead Operator signature & date:			
MONTHLY Periodic Inspection	ns for Long-Term De	signated Location	าร
(NO Hot Work permitted a		•	_
Use front page Precautions for com	ipleting your monthl o ESH department whe		ections.
NAME	SIGNED		DATE
Single-Shift Actu	al Hot Work Start/S	top Log	
Name of Person Performing Hot Work	Date	Start Time	Stop Time
Return this form to ESH depart	 ment when completed w	 ith vour shift work.	