



CONFINED SPACE ENTRY PERMIT

PERMIT IS VALID FOR 8 HOURS ONLY

1. Location:	2. Date:	3. Name of Entry Supervisor: _____
4. Purpose of Entry:		(Print) _____
5. Start Time: _____ Stop Time: _____		6. Permit Cancelled Time: _____ Reason Permit Cancelled:

7. Rescue & Emergency Services:			8. Communication Method:		
HAZARDS	YES	NO	SPECIAL REQUIREMENTS:	YES	NO
Oxygen Deficiency	<input type="checkbox"/>	<input type="checkbox"/>	Hot Work Permit Required	<input type="checkbox"/>	<input type="checkbox"/>
Combustible Gases or Vapors	<input type="checkbox"/>	<input type="checkbox"/>	Lockout / Tagout	<input type="checkbox"/>	<input type="checkbox"/>
Combustible Dust	<input type="checkbox"/>	<input type="checkbox"/>	Lines Broken / Capped / Blanked	<input type="checkbox"/>	<input type="checkbox"/>
Carbon Monoxide	<input type="checkbox"/>	<input type="checkbox"/>	Purge/Flush / Vent	<input type="checkbox"/>	<input type="checkbox"/>
Hydrogen Sulfide	<input type="checkbox"/>	<input type="checkbox"/>	Area Secured /Signs & Flags Posted	<input type="checkbox"/>	<input type="checkbox"/>
Toxic Gases or Vapors	<input type="checkbox"/>	<input type="checkbox"/>	Ventilation	<input type="checkbox"/>	<input type="checkbox"/>
Toxic Fumes	<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>
Skin-Chemical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	SPECIAL EQUIPMENT	YES	NO
Electrical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	Breathing Apparatus / Respirator	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	Full Body Escape Harness	<input type="checkbox"/>	<input type="checkbox"/>
Engulfment Hazards	<input type="checkbox"/>	<input type="checkbox"/>	Tripod w/ Winch	<input type="checkbox"/>	<input type="checkbox"/>
Entrapment Hazards	<input type="checkbox"/>	<input type="checkbox"/>	Lifelines	<input type="checkbox"/>	<input type="checkbox"/>
Thermal Hazards	<input type="checkbox"/>	<input type="checkbox"/>	Lighting (Explosive Proof/Low Voltage)	<input type="checkbox"/>	<input type="checkbox"/>
Slip or Fall Hazards	<input type="checkbox"/>	<input type="checkbox"/>	PPE	<input type="checkbox"/>	<input type="checkbox"/>
Weather	<input type="checkbox"/>	<input type="checkbox"/>	Fire Extinguisher	<input type="checkbox"/>	<input type="checkbox"/>

ATMOSPHERIC TESTING			DO NOT ENTER CONFINED SPACE IF THE PERMISSIBLE ENTRY LEVELS ARE EXCEEDED	
HAZARD	PEL	TEST RESULTS	TESTING START TIME:	TESTING STOP TIME:
% of Oxygen	19.5% to 23.5%			
% of LEL	Less than 10%			
% of LFL	Less than 10%			
Carbon Monoxide	35 PPM (8hr.)			
Hydrogen Sulfide	10 PPM (8hr.)			
Other:				

PERSON PERFORMING TESTING	
Name (Print):	Signature:
Date:	Time:

ATMOSPHERIC TESTING INSTRUMENT	
Brand Name:	
Model Number:	
Serial Number:	
Date Last Calibrated	
NAME OF ENTRANTS	NAME OF ATTENDANTS
PERMIT AUTHORIZATION	
I certify that all actions and conditions necessary for safety entry have been performed.	
Name (Print): _____ Sign: _____ Date: _____	

Entry Procedure Checklist: Complete the following steps before, during, and after a confined space entry:

Step 1

Obtain a Permit-Confined Space Entry Form from Program Coordinator.

Step 2

Notify Supervisor before the Confined Space Entry.

Step 3

Verify atmospheric testing meter has been calibrated and is in proper working order.

Step 4

Complete the top portion of the Confined Space Entry Permit.

Step 5

Ensure all rescue equipment (e.g. tripod, body-belt, lanyard) is in place prior to entry.

Step 6

Test the atmosphere of the confined space with the multi-gas detector prior to entry. The entrant and attendant should sign the permit authorization section on the bottom of the permit to ensure all actions and conditions necessary for safe entry have been performed.

Step 7

Employee entering the confined space should wear multi-gas detector after the pre-atmosphere testing is complete. The employee should also have a full body harness and lanyard attached to the rescue tripod. Employee shall have a radio and any other necessary personal protective equipment.

Step 8

Employees shall not enter the confined space until step 7 is completed. The entrant and attendant shall complete the Hazards and Special Requirements Section of the Permit once the employee is within the confined space. The entrant should also gather the % Oxygen, % Explosive Gases, Carbon Monoxide, and Hydrogen Sulfide readings and communicate them to the attendant to place on the Permit Form.

Step 9

The attendant should maintain in constant communication with the entrant until the entrant has exited the confined space.

Step 10

The attendant should contact Supervisor once the entrant has exited the confined space.

Step 11

Once the job is complete, the Confined Space Entry Permit shall be closed out/terminated and given to program coordinator, to file in the Confined Space Records.