

CONFINED SPACE ENTRY PERMIT

☐ NON-PERMIT CONFINED SPACE

Permit valid for 12 hrs. or 1 work shift.

Space to be entered. (description):							
Purpose of Entry:							
Date of Entry:				Duration of Entry Permit (hours):			
Authorized Entrants (list below by name):				Attendants (list below by name):			
Entry Supervisor who authorized entry (Signature):							
Check all Existing and Potential Hazards for The space to be entered:				Check all the Measures you will use to isolate the space and control or eliminate hazards before entry:			
☐ Atmospheric (toxic, low oxygen, etc.) ☐ Chemical Contact (skin, breathing exposure) ☐ Electrical (exposed energized wires) ☐ Mechanical (moving machinery) ☐ Temperature (heat or cold) ☐ Engulfment (drowning, smothering) ☐ Entrapment (tight spaces, entanglement) ☐ Other (list here):				☐ Disassemble Linkages ☐ Blanking, Blocking, Bleeding ☐ External Barricades ☐ Confined Space Danger Signs ☐ Forced Air Ventilation ☐ Lock Out/Tag Out ☐ Air Monitoring ☐ Local Fume Exhaust ☐ Other (list here):			
Acceptable Air Monitoring & Entry Conditions							
Test top, middle and bottom of space. Monitor air while working	Acceptable Entry conditions	Initial Test Results	Test Results	Test Results	Test Results	Test Results	Test Results
Oxygen Content (%)	19.5% to 23.5%						
Flammable Vapor/LEL (%)	less than 10%						
Carbon Monoxide (ppm)	less than 35 ppm						
Hydrogen Sulfide (ppm)	less than 10 ppm						
Other (list here)							
Gas Tester Name	Initials of Tester ⇒ Time of Test ⇒						
CONTACT SUPERVISOR IF HAZARDS CANNOT BE ELIMINATED OR CONTROLLED. DO NOT ENTER							
Communication Methods to be Used by Entrants and Attendants:							
☐ Voice ☐ Radio ☐ Hand Signals ☐ Other (list here):							
Equipment Used by Entrants and Attendants (check all that apply)							
☐ Gas Monitor	☐ Tripod	☐ Ventilating Equipment	☐ Barriers/Barricades				
☐ Ladder	☐ Safety Harness	☐ SCBA	☐ Protective Clothing				
☐ Lighting	☐ Fall-Arresting Hoist	☐ Respirator (APR)	☐ Lifeline				
☐ Other equipment/PPE (list here):							

RESCUE & EMERGENCY SERVICES

TELEPHONE 9-1-1 OR LOCAL EMERGENCY NO.: _____

Do not destroy this permit. After cancellation, this permit must be kept on file for 1 year. Return completed and cancelled permits to the corporate office.

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ENTRANT LOG

[illegible]

THIS CONFINED SPACE ENTRY PERMIT HAS BEEN CANCELLED:

By: _____ Time: a.m./p.m.: _____ Date: _____
Entry Permit Supervisor Signature

Do not destroy this permit. After cancellation, this permit must be kept on file for 1 year. Return completed and cancelled permits to the corporate office.