

Confined Spaces Work Permit

Risk Assessment Carried Out?

Work to be Carried Out

All Items to be Checked

- | | | | |
|---|--------------------------|---|--------------------------|
| 1. Has rescue equipment been checked? | <input type="checkbox"/> | 6. Has atmospheric testing taken place? | <input type="checkbox"/> |
| 2. Give location of the nearest operational phone? | <input type="checkbox"/> | 7. Naked lights extinguished, smoking material surrendered? | <input type="checkbox"/> |
| 3. Have warning signs and barriers erected around access? | <input type="checkbox"/> | 8. Are all operatives wearing the appropriate equipment? | <input type="checkbox"/> |
| 4. Have any access covers been opened? | <input type="checkbox"/> | 9. Is appropriate first aid equipment available? | <input type="checkbox"/> |
| 5. Has forced air ventilation taken place? | <input type="checkbox"/> | 10. Has a weather forecast been obtained? | <input type="checkbox"/> |

Note:

A confined space is defined as any place including any chamber, tank, pit, vat, silo, trench pipe, sewer, flue, well or other similar space, which by virtue of its enclosed nature, there arises a reasonably foreseeable risk.

Atmospheric Testing

I have tested the atmosphere in the confined space for the presence of the following gases and readings are as follows:

Low Oxygen	<input type="text"/>	High Oxygen	<input type="text"/>
Flammable Gas	<input type="text"/>	Toxic Gas	<input type="text"/>
Others. Please Specify:	<input type="text"/>		

The atmosphere was found to be within permitted levels and work can proceed

Signed _____ Date _____ Time _____

Working Team

Enter the names of the working tea

1. _____ Signed: _____
2. _____ Signed: _____
3. _____ Signed: _____

Emergency Team

Enter the names of the emergency tea

1. _____ Signed: _____
2. _____ Signed: _____

This permit will remain in force until Date _____ Time _____

The following additional equipment/precautions are to be taken and used/observed

Signed _____ Date _____ Time _____

Cancellation

- I hereby declare that the work referred to above has now been completed.
- All the personnel named in this permit have been withdrawn from the confined space.
- All tools and equipment have been withdrawn from the confined space, cleaned and stored.
- Further work in the confined space will not take place unless a new permit to work is issued.

Signed _____ Date _____ Time _____