

# Permit - Confined space entry

<b>SITE NAME</b>	
------------------	--

<b>TECHNICANS DETAILS</b>
---------------------------

Full name	Date of initial entry
Time of initial entry	Location
Observer/Entrant Communication	Visual      Radio      Voice

<b>Confined space hazard assessment</b>
---

Oxygen deficient atmosphere	Painting or Solvent fumes	Falls	Hot Equipment/Surfaces	Stored pressure
Oxygen enriched atmosphere	Protruding Objects	Chlorine	Moving Mechanical Parts	Engulfment
Flammables/Combustibles	Impalement Hazards	Sewer	Carbon Monoxide (CO)	
Welding/Burning/Fumes	Slippery surfaces	Corrosives	Exposed electrical parts	

<b>Safety Equipment Required</b>
----------------------------------

Lifeline/Lanyard	Emergency Channel Radio (Mandatory)	Portable Lighting	Tripod	Goggles
Respirator	Mechanical Retrieval Device	GFCI Protection	Harness	Other
Fire Extinguisher	Special Clothing (Eg. Tyvek)	Forced Air Ventilator	Ladders	

<b>Confined space preparation/isolation</b>
---

Vessel contents drained/flushed/neutralized	Vessel cleaned and purged	Worksafe Notified
Work area isolated with signs/barriers	Forced Air Ventilation	Burning and Welding Permit
All input/discharge lines capped/plugged	Ventilate space prior to entry	TLT
Continuous Atmospheric Monitoring	SOP/JSA reviewed by all entrants	Other

<b>Pre-entry &amp; periodic atmospheric testing</b>
---

Meter	Calibrated	Bump Tested	Date Calibrated	Space Sampled by:		
Atmosphere	Safe Limits	Pre Entry Reading	Periodic Reading	Periodic Reading	Periodic Reading	Periodic Reading
Sample Time	-----					
Oxygen Level (O2)	> 19.5 - 23.5% <					
Lower Explosive Limit	Below 10% LEL					
Carbon Monoxide (CO2)	< 25.0 ppm					
Hydrogen Sulfide (H2S)	< 10.0 ppm					

<b>Authorized Entrant(s)</b>
------------------------------

Name	CSE Licence Number	Sign in	Time in	Sign out	Time out

<b>Authorized Observer(s)</b>
-------------------------------

Observer
Standby Rescue

<b>Authorization for entry permit</b>	<b>Cancelled-work complete</b>
---------------------------------------	--------------------------------

Authorizing Person	Authorizing Person
--------------------	--------------------

I have reviewed this permit and all procedures with participants and addressed ALL recognized Safety/Health Hazards.

Signature	Date
-----------	------