Permit to work

NAME		COMPANY NAME		PERMIT DATE	

HRETD (PTY)LTD Human Resources EDUCATION, TRAINING & DEVELOPMENT

A) PLANT DETAILS	HOT WORK ☑		COLD WORK ☑	
	SECTION		WORKS ORDER No.	
	PLANT / EQUIPMENT			

DESCRIPTION OF WORK TO BE DONE

B) PERSONS INVOLVED IN THE TASK (for more than 6 persons add names at back of permit)

	NAME & SURNAME	EMPLOYEE No.	NAME & SURNAME	EMPLOYEE No.
1				
2				
3				

C) RECOMMENDED PPE REQUIREMENTS

STANDARD AREA PPE	☑	SPECIALISED PPE	☑	SPECIALISED PPE	☑
ACID PROOF / HEAT-RESISTANT OVERALLS		WELDING HELMET / FACE SHIELD		SELF-CONTAINED BREATHING APPARATUS	
REFLECTIVE VEST		APRON / SPATS		SAFETY HARNESS	
EAR PLUGS		GUMBOOTS / WADERS		SAFETY SHOWER	
GOGGLES		CHEMICAL RESPIRATOR / DUST MASK		OTHER:	
SAFETY SHOES		LIFE JACKET / BOYANCY VEST			
HARD HATS					

ASSESSMENT ON CRITICAL PRECAUTIONARY MEASURES

D) GAS TESTING (confined space / inside or outside buildings)

GAS TYPE	MAX %	ACTUAL %
OXYGEN (O_2)	Min 19.5, Max 22	
SULPHUR DIOXIDE (SO_2)	3ppm	
CARBON MONOXIDE (CO)	100ppm	
EXPLOSIVE GAS	1% Col	

CONCENTRATIONS BELOW ACCEPTABLE LIMITS ☑	
ENTRY APPROVED ☑	
STANDBY PERSON NAME	

E) WORKING AT HEIGHTS (do not start work if controls are not listed)

CONTROL TYPE	INSPECTED (signature)
PORTABLE LADDER	
LIFE LINE	
SCAFFOLD	
MOBILE PLATFORM	
WORK PLATFORM	

F) LOCKOUT & ISOLATION (de-energising of each source will be signed off by relevant person)

TYPE OF ISOLATION	☑	LOCK No.
ELECTRICAL (one lock no. not accepted)		
MECHANICAL (one lock no. not accepted)		
POSITIVE ISOLATION (acid / liquid / slurry)		
HEAT / FIRE		
RADIATION SEALED		
GASES / FUMES		
ENVIRONMENTAL		
EXCAVATION WORK (permit supplied by electrical engineer)		

G) RISK ASSESSMENTS

ISSUE-BASED RISK ASSESSMENT COMPLETED ☑	

CRITICAL HOT WORK PRECAUTIONS TO BE COMPLETED
H) checklist for hotwork

	☑
AVAILABLE SPRINKLERS, HOSE STREAMS & EXTINGUISHERS WORKING	
REQUIREMENTS WITHIN 10m	
FLAMMABLE LIQUIDS, DUST, LINT & OIL DEPOSITS REMOVED / PROTECTED WITH FIRE-RESISTANT TARPAULINS & METAL SHIELDS	
EXPLOSIVE ATMOSPHERE ELIMINATED	
FANS & CONVEYORS ISOLATED / SHUT DOWN	
COMBUSTIBLE FLOORS WET DOWN / COVERED IN DAMP SAND OR FIRE RESISTANT SHEETS	
WORK ON WALLS / CEILINGS / ENCLOSED EQUIPMENT	
COMBUSTIBLES ON OTHER SIDE OF WALLS MOVED AWAY	
ENCLOSED EQUIPMENT CLEANED OF ALL COMBUSTIBLES	
CONTAINERS PURGED OF FLAMMABLE LIQUIDS / VAPOURS	
FIRE WATCH / HOT WORK MONITORING REQUIREMENTS	
FIRE WATCH HAS SUITABLE EXTINGUISHERS / CHARGED HOSES	
FIRE WATCH TRAINED TO USE EMERGENCY EQUIPMENT	
ADDITIONAL WATCH FOR ADJACENT AREAS, ABOVE / BELOW	
WORK ON MOVABLE MACHINERY	
EQUIPMENT FIRE SUPPRESSION SYSTEM DISABLED	
TYRES REMOVED / COVERED / DEFLATED	
TYRE PRESSURE MONITORED BEFORE, DURING & AFTER HOT WORK	
EXPOSED PARTS COVERED WITH HEAT BLANKET	
ALL HOT WORK TOOLS INSPECTED	

I) ADDITIONAL HAZARDS:

TRANSFER OF AUTHORITY

J) TRANSFER OF AUTHORITY TO SERVICE PROVIDER BY AREA / EQUIPMENT OWNER

THE ABOVE PLANT HAS BEEN REMOVED FROM OPERATION AND PERSONS UNDER MY SUPERVISION HAVE BEEN INFORMED

NAME			
CONTACT DETAILS			
PERMIT-AUTHORISING PERSON SIGNATURE			
DATE		TIME	

K) ACCEPTANCE OF CERTIFICATE BY SERVICE PROVIDER

I HAVE READ AND UNDERSTOOD THIS PERMIT TO WORK REQUIREMENTS AND WILL UNDERTAKE TO WORK IN ACCORDANCE WITH THE CONDITIONS IN IT

NAME			
CONTACT DETAILS			
RESPONSIBLE / COMPETENT PERSON SIGNATURE			
DATE		TIME	

L) TRANSFER OF AUTHORITY BACK TO AREA / EQUIPMENT OWNER (JOB COMPLETION BY SERVICE PROVIDER)

THE WORK HAS BEEN COMPLETED AND ALL PERSONS UNDER MY SUPERVISION, MATERIALS AND EQUIPMENT WITHDRAWN

NAME			
CONTACT DETAILS			
RESPONSIBLE / COMPETENT PERSON SIGNATURE			
DATE		TIME	

ACCEPTANCE BY AREA / EQUIPMENT OWNER

NAME	
RESPONSIBLE / COMPETENT PERSON SIGNATURE	
DATE	

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