

HOT WORK PERMIT

*Instructions for Permit Authorizing Individual (PAI) or Supervisor:

- 1. Verify precautions listed below or DO NOT proceed with work!
- 2. Fill in all blanks (using N/A where 'not applicable')

Post this form at work site where it will be maintained until work is complete. Upon completion of the work, return this form to the Department of Environmental, Health, and Safety.

Date: _____ Work Order # or Confined Space Permit # _____

Location/Building/Floor (be specific) _____

Description of Work Being Performed _____

Name of person doing hot work: _____ (print)

HOT WORK CHECKLIST

<input type="checkbox"/>	Sprinklers and host streams in service & operable
<input type="checkbox"/>	Hot Work equipment in good condition (i.e. power sources, welding leads, torches)
<input type="checkbox"/>	Multi-purpose fire extinguisher and/or water pump pan
<input type="checkbox"/>	Dust, debris, flammable liquids, and oily deposits are more than 35' from work
<input type="checkbox"/>	Explosive atmosphere in area has been eliminated
<input type="checkbox"/>	Combustibles (wood floors, tile, carpeting) have been wet down, covered with damp sand or fire blankets
<input type="checkbox"/>	Flammable and combustible materials have been removed where possible or otherwise protected by guards
<input type="checkbox"/>	All wall and floor openings have been covered and walkways beneath hot work have been protected
<input type="checkbox"/>	Confined space (if applicable) has been cleaned of all combustibles
<input type="checkbox"/>	Containers of flammable liquids/vapors have been moved an acceptable distance from hot work area
<input type="checkbox"/>	Confined space entry guidelines have been followed
<input type="checkbox"/>	Fire watch will be provided during and for 30 minutes following the hot work -including any/all break times
<input type="checkbox"/>	Fire watch has been supplies with an extinguisher and/or water pump can
<input type="checkbox"/>	Fire watch is trained in use of fire extinguisher equipment and familiar with location of audible alarm
<input type="checkbox"/>	Fire watch, if needed,, will be placed on opposite side of walls, and below floors and ceilings
<input type="checkbox"/>	Please put your initial in the upper left corner of this form
<input type="checkbox"/>	Other precautions?

**The above location has been examined, the precautions checked on the Hot Work Checklist have been taken to prevent fire, and permissions is authorized for this work. Also, work area and adjacent areas to which sparks and heat might spread have been inspected and will be watched during the Hot Work operation.*

Supervisor or Permit Authorizing Individual (PAI) Signature

Date

Person Doing Hot Work Signature

Date

Fire Watch Sign-Off (if applicable)

Date

Date Started

Time Started

a.m.

p.m.