



Confined Space Entry Procedure Worksheet

1. Location

Exact name and location of space to be entered.

2. Hazard Identification & Determination - (check all that apply)

a. Tasks to be performed.

- | | | | | |
|-----------------|------------------|--------------|-------------------|-----------------------|
| Welding/Cutting | Solvent Cleaning | Dry Sweeping | Painting | Inspection |
| Grinding | Vacuuming | Scraping | Mechanical Repair | Other (Specify below) |

Hazardous Contents: (Materials that were, may still be, or will be in the space). Attach Safety Data Sheet(s) - *(check all that apply)*

- | | | | |
|------------------------|-------------|-----------------|-----------------------|
| Oxygen Deficiency | Natural Gas | Caustics | Hot Air |
| Carbon Monoxide | Steam | Acids | Epoxy Powder Coat |
| Hydrogen Sulfide | Water | Cleaning Agents | Other (Specify below) |
| Combustible Atmosphere | Fuel / Oil | Solvents | |

The signs & symptoms of overexposure are: (Use Safety Data Sheets) - *(check all that apply)*

- | | | | |
|-----------|-------------------|------------|-------------------------|
| Headache | Light Headedness | Nausea | Giddiness |
| Stupor | Eye Irritation | Chest Pain | Others: (Specify below) |
| Dizziness | Throat Irritation | Vomiting | |
| Fatigue | Nose Irritation | Collapse | |

Physical, Entrapment and Engulfment Hazards: (Reference Engineering Drawings) - *(check all that apply)*

- | | | | | |
|------------------|-------------------|-------------------------|---------------|------------------|
| Fire / Flammable | Falling | Sloping Sides | Soft Material | Moving Agitators |
| Explosive | Slippery Surfaces | Limited Maneuverability | Open Manhole | Liquids |

3. Pre-Entry Confirmation

Initial Atmospheric Testing (to be completed prior to entry)

Gas / Vapor	Date	Instrument /Detector Tube Type	Date of Calibration/ Expiration	Test Result	Range of Acceptable Concentrations
Oxygen Level					>19.5% & <23.5%
Combustible Gas Vapor					<10% of LEL
Carbon Monoxide					<35 ppm
Hydrogen Sulfide					

Tested by: _____ Date: _____ Acceptable Unacceptable



5. Hazard Elimination Procedures

6. Access Prevention / Warning

Determination that the space is safe to open will be made by: _____

Authorization to open the confined space may be given by: _____

How will the entrance be opened? _____

The entrance will be marked, guarded, or secured by: _____

7. Hazard Re-Evaluation

List the materials which require ventilation for dilution or to prevent build-up: _____

List the hazards which have not been eliminated and require further controls: _____

List any remaining entrapment or engulfment hazards: _____

8. Air Contaminate Monitoring

Not Required

Required

Attach monitoring log

Periodic monitoring for: _____

Continuous monitoring for: _____

Appropriate Monitor Model Numbers: _____ Number of meters _____

9. Hazard Control Requirements

All entries where the hazard has not been eliminated and those with engulfment or entrapment hazards require:

1. Equipment to control the hazards which were not eliminated.
2. Emergency retrieval / rescue equipment.
3. Provisions for a trained Rescue Team.
4. A trained Attendant.

If the hazards have not been eliminated and any one of these four items is not present and functional,

No Entry Can Be Made



15. Worksheet Preparation and Approval

- The diagram and /or procedure do not match the physical surroundings.
- Required equipment not present or not functional.
- Non-functioning air monitoring device(s).
- Air contaminate above acceptable level or alarm sounding on monitoring device. (See air monitoring section)
- Conditions arise outside the scope of the original entry.
- Failure of lockout system, including blanking, bleeding, removing spool, etc.
- Failure of mechanical ventilation

Other (List) _____

16. Authorized Personnel

Entry Supervisor(s) _____

Authorized Entrant(s) _____

Authorized Attendant(s) _____

17. Training

1. All Entrants have received a Safe Job Description
2. All Entrants have received training on the Duties of an Entrant.
3. All Attendants have received a Safe Job Description
4. All Attendants have received training on the Duties of an Attendant.
5. All Rescue Team Members have received a Safe Job Description
6. All Rescue Team Members have received training on the Duties of a Rescue Team Member.

The Entry Supervisor(s) have reviewed the Duties of the Entry Supervisor and all sections of this permit to ensure completeness prior to anyone entering the confined space.

Permit Valid Start Date: _____ Time: _____ End Date: _____ Time: _____

I have read the above permit and confirm that all items have been completed and therefore permit the entry to commence.

Entry Group Supervisor (*Print Name*): _____ Date: _____ Time: _____

Entry Group Supervisor (*Signature*): _____

Unplanned Events: _____

Permit Canceled by _____ Time _____ Date _____

Access Prevention & Warning Completed by _____ Time _____ Date _____