|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Contractor Company Name: | | | Emergency Contact No. | | | | | Employees Performing Work  1)  2)  3)  4) | | | | |
| Contractor Supervisor Name: | | |  | | | | |
| Area: | |  | | | | Date | | |  | Time |  | |
| (Area description must be precise) | | | | | | | | | | | | |
| Permit Requestor: | | |  | | Sign | | |  | | | |  |
| Performing Work: | | |  | | Sign | |  | | | | | |

**Note:** I understand the precaution to be taken as described above and as per Project requirement & here by confirm that Work will be executed under my supervision by following all precaution & Safety Rules

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Description of work:** |  | | | | | | | |
|  | | | | | | | | |
| **Work Execution Date:** | | |  | **Time:** |  | **Valid From:** |  | **To:** |  |

The above signing person will be responsible to ensure that the above described work will be done under all the safety precaution mentioned on the PTP. The following precautions are to be taken.

The following precautions are to be taken.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No | Item | | | | | | | Yes | | | No | N/A | |
| 1. | Has fire watch personnel been assigned to each floor or area adjacent to the work area where there is a potential for fire to extend or ignite? | | | | | | |  | | |  |  | |
| 2. | Are fully charged fire extinguishers, rated at least 2A-B-C accessible to each fire watch  person and to the persons performing the hot work? | | | | | | |  | | |  |  | |
| 3. | Is the area around and below the hot work clear of other workers and activities that could  create a fire hazard? | | | | | | |  | | |  |  | |
| 4. | Have all persons been instructed in the proper use of fire extinguisher? (P.A.S.S. method) | | | | | | |  | | |  |  | |
| 5. | Have all combustible materials within 35’ of the hot work area been removed, shielded or  otherwise protected from sparks, slag, or flame? | | | | | | |  | | |  |  | |
| 6. | Have all persons been instructed in the fire reporting procedures should a fire occur? | | | | | | |  | | |  |  | |
| 7. | Have fire watch personnel been instructed to continuously monitor areas exposed to hot  work for at least 30 minutes after the hot work is complete? | | | | | | |  | | |  |  | |
| 8. | Is the proper PPE in place? | | | | | | |  | | |  |  | |
| 9. | Is the proper ventilation? | | | | | | |  | | |  |  | |
| 10. | Is there proper lighting? | | | | | | |  | | |  |  | |
| 11. | Does everyone know where the closest exits are? | | | | | | |  | | |  |  | |
|  | | | | |  | |  | |  | | |  | | |  | | |  | |
| **Contractor/Project Safety:** | | |  | | **Sign** | |  | | | **Date:** | |  | | | |  | |

**Permit Completion:** I hereby declare that the work is completed/ suspended, all workers under my control have been withdrawn and the site restored to a safe condition.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Person Performing Work:** |  | **Sign** |  | **Date:** |  |
| **Fire Watch:** |  | **Sign** |  | **Date:** |  |

I have inspected the work area covered by this permit for at least 30 minutes after the completion of work and I did not detect any sign of fire or smoldering

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Fire Watch:** |  | **Sign** |  | **Date:** |  |