



CONFINED SPACE ENTRY PERMIT

DATE OF ENTRY: _____

PERMIT EXPIRES: _____

THIS PERMIT MUST BE COMPLETED AND SIGNED PRIOR TO ALL CONFINED SPACE ENTRIES & RETAINED FOR AT LEAST 2 YEARS						
1. IDENTIFICATION	CONFINED SPACE LOCATION:					
	ADDRESS:					
	CONFINED SPACE NO:			MANHOLE NO: (if applicable)		
2. DESCRIPTION OF WORK						
3. HOT WORK	WILL HOT WORK BE CONDUCTED IN THE CONFINED SPACE? YES <input type="checkbox"/> NO <input type="checkbox"/> If answer is yes a Hot Work Permit must also be completed HOT WORK PERMIT NO:					
4. ISOLATION	ELECTRICAL ISOLATION: YES <input type="checkbox"/> NO <input type="checkbox"/>		PIPELINE ISOLATION: YES <input type="checkbox"/> NO <input type="checkbox"/>			
	MECHANICAL ISOLATION: YES <input type="checkbox"/> NO <input type="checkbox"/>		OTHER:			
	REQUIRED ISOLATION IS CHECKED BY:			SIGN:		
5. PURGING AND VENTILATION Record reading prior entry	PURGING REQUIRED: YES <input type="checkbox"/> NO <input type="checkbox"/>		IF YES GAS USED:			
	NATURAL/FRESH AIR: YES <input type="checkbox"/> NO <input type="checkbox"/>					
	MECHANICAL VENTILATION: YES <input type="checkbox"/> NO <input type="checkbox"/>		EXTRACT <input type="checkbox"/> PUSHIN <input type="checkbox"/>			
	IF MECHANICAL VENTILATION IS REQUIRED IS IT FOR THE DURATION OF ENTRY TO THE SPACE? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, WHAT TYPE:					
6. ATMOSPHERE TESTING	LEL %	CO ppm	O2 %	H2S ppm	AMMONIA	OTHER
	IS CONTINUOUS MONITORING REQUIRED FOR THE DURATION OF ENTRY? YES <input type="checkbox"/> NO <input type="checkbox"/>					
7. COMMUNICATION	CONTINUOUS COMMUNICATION HAS BEEN ESTABLISHED PRIOR TO ENTRY? YES <input type="checkbox"/> NO <input type="checkbox"/>					
	DESCRIBE (Radio, lifeline, visual, speaking etc):					
8. PPE AND OTHER EQUIPMENT Tick items of PPE and other equipment required by persons entering the confined space	Gloves <input type="checkbox"/>	Eye protection <input type="checkbox"/>	Platform <input type="checkbox"/>	Hearing pro <input type="checkbox"/>	Helmet <input type="checkbox"/>	
	Boots <input type="checkbox"/>	Self rescue resp <input type="checkbox"/>	Chemical suit <input type="checkbox"/>	Barricades <input type="checkbox"/>	Ladder <input type="checkbox"/>	
	Airline <input type="checkbox"/>	Respiratory pro <input type="checkbox"/>	Ventilation <input type="checkbox"/>	Fall arrest <input type="checkbox"/>	Overalls <input type="checkbox"/>	
	Signage <input type="checkbox"/>	Two way radio <input type="checkbox"/>	Gas director <input type="checkbox"/>	Lighting <input type="checkbox"/>	Lifeline <input type="checkbox"/>	
	First aid <input type="checkbox"/>	Fire extinguisher <input type="checkbox"/>	OTHER <input type="checkbox"/> (List)			
9. PERSONNEL	NAME OF ENTRY PERSON		SIGNATURE		NAME OF STANDBY PERSON	



10. EMERGENCY PLANS	EMERGENCY CONTACT NUMBERS (List):				
	EMERGENCY EQUIPMENT (List):				
11. RESCUE PLAN					
12. SAFE TO ENTER CSE AUTHORISING OFFICER	THE CONFINED SPACE DESCRIBED IN THIS ENTRY CHECKLIST IS IN MY OPINION SAFE TO ENTER USING PRECAUTIONS LISTED ABOVE AND ALL PERSONS ARE PROPERLY TRAINED TO PERFORM THIS WORK				
	NAME _____		SIGNATURE _____		
	DATE/TIME _____				
13. ENTRY TIME	CONTACT:		NUMBER:		
	TIME PHONED (Entry):				
14. ENTRY AND EXIT LOG	NAME	TIME IN	TIME OUT	TIME IN	TIME OUT
15. EXIT TIME	CONTACT:		NUMBER:		
	TIME PHONED (Exit):				
16. SIGN OFF AUTHORISING OFFICER	THIS AREA HAS BEEN MADE SAFE, ALL PERSONNEL NAMED ABOVE AND TOOLS/EQUIPMENT HAVE EXITED THIS SPACE. THIS JOB IS NOW CLOSED.				
	NAME _____		SIGNATURE _____		
	DATE/TIME _____				



ATMOSPHERE REQUIREMENTS FOR CONFINED SPACE ENTRY

Toxic Contaminants

Contaminant	Exposure Limit 8 hrs. TWA
Carbon Monoxide (CO)	30 ppm
Hydrogen Sulfide (H ₂ S)	10 ppm
Ammonia (NH ₃)	25 ppm
Hydrogen cyanide (HCN)	10 ppm

Harmful Dusts

Asbestos – all except white	.001 fibres/ml
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Oxygen-in-Air Air Specification

	Min.	Max.
Oxygen	19.5%	23.5%

Flammable Contaminants

(For information only)

NB: Note that the flammable gas meter **must** be calibrated for the gas or gases which may be present. A meter calibrated for methane will give incorrect readings in hydrogen, for example, with potentially fatal results.

Contaminant	LFL	UFL
Methane (natural gas)	5%	15%
Propane/butane (LPG)	2%	9.5%
Hydrogen	4%	75%
Ammonia (NH ₃)	15%	27%

