



## PERMIT TO WORK STANDARD

### 1. Purpose

To define a standardized system for obtaining permission to execute a potential hazardous work or an activity safely by direct employees or contractors with adequate protection against any injury or harm and by using essentially a safe work method with a clear understanding between direct employees or the contractors and the department that has initiated such work. It serves as a means of communication between different departments, plant supervisors, operators, contractors, agencies and other stakeholders.

### 2. Scope

Permit to Work is applicable for all high-risk activities (see list of High-Risk activities – **Appendix-A**) performed by direct employees or by contractors whether supervised directly or indirectly by Company in all manufacturing units, plants, offices, R&D Centres, Warehouses, Laboratories.

**3. Permit issuer:** A direct employee of Company who has received Company's formal training and has been trained satisfactorily and authorized to initiate or issue a permit to work.

**4. Permit acceptor:** A direct employee of Company or a Contractor who is authorized to perform the task as described in the Permit and who has been in the team of the risk assessment of the permit to perform the work.

**5. Person in charge:** The person in charge of a shift (production manager, Operations manager), Maintenance or process engineer for any activities performed both in or out of hours.

### 6. Systems:

- a. All high-risk activities irrespective of whether supervised by Company or not (including, but not limited to those listed in the High-Risk Activities standard) must be controlled through a systematic Permit to Work process which will encompass the following:
  - Risk assessment in the prescribed format of the work that needs to be done.
  - Documentations of all Risks captured and the precautions taken
  - A formal authorization issued to the persons carrying out the work.
- b. Steps and documentation of the Permit to Work process will depend on the frequency of the activities:

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- **Exceptional activities** – includes project work and tasks carried out once per year or less often. For example, Construction work, Installation of equipment, Annual Inspection.
- **Exceptional activities carried out in multiple locations during a shift.** For example, replacement of Light Bulbs using a mobile device, inspection of electrical cabinets.
- **Frequent activities.** Frequent activities are carried out more than once per year to once per shift. Examples: Inspection of equipment, cleanout, preventive maintenance
- **Normal production and maintenance activities.** High risk activities that are part of the normal production process; maintenance high-risk activities carried out in the maintenance workshop. Examples: lifting products using a crane or forklift, welding or grinding pieces as part of the normal production process, hot work carried out in the maintenance area

## 7. Permit to Work Procedure refer Appendix- B

## 8. Types of Permits to Work shall include:

- 1) General Permit
- 2) Confined Space Entry Permit
- 3) Hot Permit
- 4) Electrical Permit
- 5) Working at Height Permit
- 6) Excavation Permit
- 7) Radiography Permit

The General Permit to work is the first permit to work to be implemented for all types of work mentioned above. This general Permit to Work may lead to a specific Permit to Work when needed (Confined space, Hot Work, Electrical or Work at height).

## 9. Validity:

- a) A Permit to Work is valid for 2 shifts consecutively or 16 hours consecutively max. after which a new Permit to Work must be issued.
- b) A Permit to Work can not cover multiple days. If a work spills over many days, a new PTW is to be obtained after 2 consecutive shifts or 16 hours consecutive daily mandated irrespective whether the work is of similar

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nature. Therefore, fresh Risk Assessment is mandated and new documents must be prepared and validated

## 10. Auditing:

- a) All exceptional activities and Exceptional activities carried out in multiple locations during a shift must be audited at least once per shift.
- b) Frequent high-risk activities must be audited at least once per month.
- c) Normal production and maintenance activities and all high-risk production tasks must be audited at least once per week.

**11. Closing of Permit-To-Work (PTW):** After the Work is completed the Permit-To Work (PTW) is surrendered and the PTW is closed and the System Status is updated as CLSD – Closed

**12. Archive:** The Permit to Work Issuer retains the original of the completed Permit to Work with the Risk Assessment and he/she shall achieve these documents for 5 years or more if legally required, in a secure and accessible manner.

## 13. Responsibility: (Working department)

- 1) The Line Manager is responsible for the following:
  - He/ She will ensure the Compliance of Permit to Work Standard.
  - He/she will ensure proper staffing, training and develop competence for the identification of high-risk activities and Permit to Work implementation and management
  - He/ She will ensure that no high-risk activity is undertaken without a clearly designated permit applicant
  - He/ She will ensure that Permits to Work are audited at the required frequent intervals.
- 2) The HSE person is responsible for the following:
  - He / She will be responsible for ensuring Permit Issuers, Permit Acceptors applicants, and other persons involved are competent enough for the job and are responsible enough to adhere strictly with all safety precautions as agreed, without any deviation or dilution.
  - He/ She will ensure sufficient training on Permit To Work has been imparted to Permit Issuers, Permit Acceptors and other people involved in the job and they are all well aware of the safety precaution.

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- He/ She will ensure high-risks activities are thoroughly and properly risk-assessed, and that the defined safety precautions are acceptable.
- He/ She will check in a routine manner that all safety precautions considered for high-risk activities are being complied fully by the stake holders (Permit Issuers, Permit Acceptors and other persons involved in the job) and are also complying to this Standard.
- He/ She finds that the safety precautions are being compromised, not respected or the situation is unsafe, or finds deviations of the Standard, he/she will raise an alarm immediately for immediate compliance.
- He/ She can exercise his/ her authority to suspend, stop activities if safe procedure is not followed and the agreed conditions to do the work safely is violated.

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3) The Permit Issuer is responsible for the following:

- He/ She will ensure that all hazards associated with the work have been identified, assessed and all risks are mitigated within acceptable limits and that all stake holders have understood the risks involved and have given an agreement to perform the job safely without any deviation. If required specify on the PTW any additional precautions that need to be taken during the job.
- He/ She will highlight any risk that has not been identified before the job commences and shall ensure full compliance prior to execution of the job.
- He / She will communicate all departments, persons who may be affected by the job.
- He/ She will ensure there is no conflicts between the proposed job and other jobs in the same area, and if necessary, initiate cross-reference that is necessary to controls in all such PTWs.
- He/ She will ensure that the PTW contains scope of the job and the documented controls mentioned are adequate to ensure that the job can be completed safely.
- He/ She will ensure that all necessary supporting PTWs / Certificates / Checklist / Risk Assessment / drawings are attached or referred to in the PTW to do the job safely.
- He/ She will ensure the Permit Acceptor is well aware about the job location and have understood fully the scope of work and the hazards associated

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with the job and the safety measures taken into account to perform and complete the job safely without any untoward incident.

- He/ She will ensure that all operational preparations, including process clearance and isolations, de-energizing and de-pressurizing have been completed satisfactorily before executing the job.
- He/ She will ensure LTT Lock Tag Try is done successfully as per the Standard.
- Confirm that the job site is safe for the job to proceed.
- He / She is fully aware about the status of the job at all times till it is completed successfully.
- He/ She is also aware about the suspended Permit to Work if any.
- He/ She will ensure shift handover of Permit to Work.
- He/ She can exercise the authority to suspend, cancel the Permit to Work if safety conditions are not met.

4) The Permit Acceptor is responsible for the following:

- He/ She will ensure to start and complete the job under PTW by complying fully with all the requirements as mentioned in PTW.
- He / She is aware of all the potential hazards and risks involved in the job and also knows the control measures and will engage well-trained, experienced, competent and authorized persons for completing the job safely with high standard of quality and complete deliverables.
- He/ She will ensure full respect of the safety precautions during the execution of the activity,
- He/ She will ensure PPE compliance and ensure correct use and care.
- He/ she will ensure the work location is clean, tidy and safe before closing out the permit.



#### 14. Accountability:

- The HOD is accountable for the implementation of and the ongoing compliance with this standard.

Appendix- A: List of High-Risk Activities

Appendix- B: Permit to Work Procedure

Appendix- C: Examples of General and Specific Permit to Work templates.

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## **Appendix-A List of High-Risk Activities**

The following activities are deemed to be high-risk activities and always require a Permit to Work:

1. Confined Space - This is an enclosed or partially enclosed space not intended or designed as a primary workplace, at atmospheric pressure whilst people are inside it, which may have a hazardous atmosphere and may have restricted means of access or egress.
2. Hot Work (outside dedicated maintenance/production areas) - this includes any welding, cutting, burning or grinding work which could result in a fire if appropriate control measures are not implemented.
3. Electrical - Work undertaken where risks of electrocution, fire or damage could result unless appropriate safety measures are agreed and followed.
4. Work at Height - this includes work over or below ground level, where people could be injured as a consequence of a fall. Examples: Roof work, working in pits, high level cleaning or maintenance.

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## Appendix- B Permit to Work Procedure

### Exceptional activities

Key Deliverables	Prepared	Signed by
Risk assessment (of the activity and of the environment in which it is carried out)	at the place of work, before work commences	Permit Issuer, Person In-charge Watch Person Permit Acceptor, and all participants
General Permit to Work form	at the place of work, before work commences, at handover, and at termination	
Use Specific Permit Forms: a) Hot Work b) Height Work c) Confined Space, d) Electrical work, e) Excavation, f) Radiography		

### Exceptional activities carried out in multiple locations during a shift.

Key deliverables	Prepared	Signed by
Risk assessment (of the activity and of the environment in which it is carried out)	at the place of work, before work commences	Permit Issuer, Person In-charge Watch Person Permit Acceptor, and all participants
General Permit to Work form	at the place of work, before work commences, at handover, and at termination	
Use Specific Permit Forms: a) Hot Work b) Height Work c) Confined Space, d) Electrical work, e) Excavation, f) Radiography		
Risk assessment (specific risks of each location)	at each location, before each repetition of the activity	

### Frequent activities

Key deliverables	Prepared	Signed by
Risk assessment (of the activity and of the environment in which it is carried out)	Once, at the place of work, and reviewed at least once per year	Permit Issuer, Person In-charge Watch Person Permit Acceptor, and all participants
General Permit to Work form		
a) Hot Work b) Height Work c) Confined Space, d) Electrical work, e) Excavation, f) Radiography		

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Work Instruction (including safety precautions to address identified risks, before, during, and after the activity)		
Proof of training	each time a new person participates	Permit Issuer
Validation of training (check skills to perform the task safely were effectively acquired)	at least once per year	Permit Issuer
OK to Start (including all safety checks)	every time, before the activity is carried out, at the place of work	Permit Issuer & Permit Acceptor

### Normal production and maintenance activities

Key deliverables	Prepared	Signed by
Risk assessment (of the activity and of the environment in which it is carried out)	Once, at the place of work, and reviewed at least once per year	Permit Issuer
General Permit to Work form		
a) Hot Work b) Height Work c) Confined Space, d) Electrical work, e) Excavation, f) Radiography		
Work Instruction (including safety precautions to address identified risks, before, during, and after the activity)		
Proof of training	each time a new person participates	Permit Issuer
Validation of training (check skills to perform the task safely were effectively acquired)	at least once per year	Permit Issuer
OK to Start (including all safety checks)	every time, before the activity is carried out, at the place of work	Permit Issuer & Permit Acceptor

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## Appendix- C: Examples of General and Specific Permit to Work templates.

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Permit to Work (PTW)		Permit No:		
<b>GENERAL</b>				
Work location where PTW is required:				
Summary of work to be undertaken:				
Cross Reference Number of any other existing PTW (if any) which may affect this PTW (YES/ NO)	Reference No of PTW			
One PTW per JOB (Not for multiple jobs). For clarification of any doubt please consult your manager.				
This permit will be counted <b>VALID</b> under following conditions:				
A. When all sections are filled up and completed in all respect truthfully.				
B. When <b>"NO SCORING"</b> from checklist (below) has been solved without compromise.				
C. When authorized by the relevant persons involved in this PTW.				
<b>PRE CHECK-LIST</b>				
(To be filled up by the Permit ISSUER at the spot where work will be executed, involving the Permit Acceptor & other stake holders)				
	YES	NO	N/A	
1	Are the contractors/workers concerned qualified and competent to undertake the identified tasks or activities?			
2	Have the contractors/workers received the appropriate site and area safety induction before commencing work?			
3	Have a formal risk assessment on the shop/floor and safe system of work of the area and activities been completed before work begins?			
4	Is there No risk for Tooling, Material (Water) used by the Contractors/ Workers to get in contact by any means with a source of Electricity?			
5	Is there any other task related permit required? Have all specific permits been issued?			
6	Is all plant and equipment in the area affected by the contractors work safely isolated and locked off?			
7	Have the contractors/worker been made aware of where the nearest call point is and site fire/emergency/evacuation rules?			
8	Have the contractors/worker been given an emergency and first aid contact responsible for the area of work?			
9	Do the people performing the work have the right PPE Required to perform the job safely?			
10	Are all equipment, including ladders, scaffold, lifting, MEWPs, electrical and mechanical equipment fit for purpose?			
11	Are the hazardous material to be used during performing the task been identified approved, controlled and secured?			
12	Is the use of services required (Water, Electric, Gas, Compressed air) available?			
13	Are suitable arrangements in place should lone work operations be required?			
14	Have any other work activities which could impact on the safety of this permit been suspended as required in this area to ensure that there is no coactivity taking place?			
15	Is the area in which work is to take place clearly identified and has it been suitably cordoned off?			
16	Have neighbouring areas been assessed for risks to local workers, contact with vehicles or other dangers?			
17	Have any additional risks or hazards (Flammable, chemicals,...) been identified and either removed or protected to prevent harm to people?			
18	Is appropriate lifting equipment available for use to avoid manual handling of loads over 23 kg?			
19	Is competent supervision present throughout the duration of the work?			
20	Are any wastes generated by the task suitably identified, contained and controlled to be correctly disposed off?			
21	Are any significant environmental impact risks from the task identified and controlled?			
Are any other precautions required to be included?				
Any other safety equipment required?				
<b>AUTHORISATION ACCEPTANCE</b>				
I confirm that I have verified the above informations and ensured that the necessary precautions have been taken. It is safe to carry out the work as defined above and the permit information has been explained to all workers involved. I accept responsibility for the work to be completed as agreed.				
<b>Responsible Persons</b>	<b>Name</b>	<b>Company</b>	<b>Signature</b>	
Permit Issuer				
Person In-Charge				
Permit Acceptor				
Watch Person				
Working Party-1				
Working Party-2				
Working Party-3				
Working Party-4				
		PERMIT STARTS		
		Day	Month Year	
		Hour	Min	
		PERMIT EXPIRES		
		Day	Month Year	
		Hour	Min	
		Duration of Job:		
<b>HANDBOOK</b>				
I confirm that the work has not been completed and I'm handing the task over.				
<b>Responsible Persons</b>	<b>Name</b>	<b>Company</b>	<b>Signature</b>	
Permit Issuer				
Permit Acceptor				
Watch Person				
		Day:	Month Year	
		Hour:	Min	
I confirm that that I have been briefed and reviewed the current status of the work area and accept the controls in place.				
<b>Responsible Persons</b>	<b>Name</b>	<b>Company</b>	<b>Signature</b>	
New Permit Issuer				
New Permit Acceptor				
New Watch person				
		Day:	Month Year	
		Hour:	Min	
<b>HAND BACK AND CANCELLATION</b>				
I confirm that the work has been completed/partially completed, checked by myself, and area is safe and tidy conditions. (*delete as appropriate)				
Permit Acceptor	Name:	Date:	Hour Min Signature:	
I have inspected the completed/partially completed* after work and hereby cancel this permit. (*delete as appropriate)				
Watch Person	Name:	Date:	Hour Min Signature:	
Permit issuer	Name:	Date:	Hour Min Signature:	
<b>TASK OVERVIEW / SAFE SYSTEM OF WORK (List Steps in order)</b>				
STEP 1				
STEP 2				
STEP 3				
STEP 4				
STEP 5				
STEP 6				
STEP 7				
STEP 8				
<b>RISK ASSESSMENT</b>				
<b>STEPS</b>	WHAT COULD GO WRONG ? (MACHINE, EQUIPMENT, PEOPLE, ORGANISATION, ENVIRONMENT)	HOW COULD IT HURT SOMEBODY ? (INCLUDING WHO CAN BE HARMED) - WITHOUT ANY CONTROLS.	CONTROLS (COLLECTIVE PROTECTION, PPE, INSTRUCTION, TRAINING, VISUALISATION, OTHERS)	IMPLEMENTED ?
<b>EMERGENCY / RESCUE PLAN</b>				
RESCUE PLAN A :				
RESCUE PLAN B (IN CASE PLAN A FAILS) :				
<b>AUDIT (At least one per shift)</b>				



Permit to Work (PTW)										Permit No: _____	
<b>CONFINED SPACE</b>											
Work location where PTW is required: _____											
Summary of work to be undertaken: _____											
Cross Reference Number of any other existing PTW (if any) which may affect this PTW (YES/ NO)										Reference No of PTW	
One PTW per JOB (Not for multiple jobs). For clarification of any doubt please consult your manager.											
This permit will be counted <b>VALID</b> under following conditions:											
A. When all sections are filled up and completed in all respect thoroughly.											
B. When <b>"NO SCORING"</b> from checklist (below) has been solved without compromise.											
C. When authorized by the relevant persons involved in this PTW.											
<b>PRE CHECK-LIST</b>											
(To be filled up by the Permit ISSUER at the spot where work will be executed, involving the Permit Acceptor & other stake holders)											
							YES	NO	N/A		
1	Confirm that work in the confined space cannot be avoided?										
2	Has a risk assessment on the shopfloor been carried out and a safe system of work is proposed and all interested parties trained in ensuring they follow it?										
3	Are the persons involved in the job, qualified, competent, medically fit & trained to undertake work in confined spaces?										
4	Are emergency arrangements agreed & in place if we need to rescue or safely remove an injured person?										
5	Is a clear means of communication readily available? Refer to risk assessment.										
6	Have all services (gas, steam, hazardous materials) & pipework been identified, safely isolated/locked off before working?										
7	Where necessary, has the confined space been purged with steam, water, gas or air?										
8	Has the confined space been electrically isolated, locked out and tested for residual energy (LTT)?										
9	Has the area around/above/below where work will take place been cordoned off?										
10	Is the temperature of the confined space below 35 Deg/c when cooled to work inside?										
11	For Resin Reactors: Has the reactor been steamed through to recovery for at least 15 minutes?										
12	Is a supply of fresh respirable air assured or is direct ventilation required & provided? (No compressed air as a supply source)										
13	Is there a safe means of accessing and exiting the confined space at all times?										
14	Are safety harnesses, lines, tripods, winches & any other safety equipment in good condition and readily accessible if needed?										
15	Is appropriate self contained breathing apparatus supplied, serviced and inspected to ensure it is fit for use at all times?										
16	Has a trained look out or emergency rescuer been nominated to respond immediately in the event of an emergency?										
17	Are PPE required by risk assessment been provided and worn?										
18	Are adequate Tools to perform the task been fit for purpose? (ATEX, low voltage, intrinsically safe and non spark)										
19	Have any other hazardous materials or conditions you could come into contact with been removed? If Yes identify with controls.										
20	Have all sludge, deposits, powder spills, fumes, materials in chutes, bins and pipes been removed to ensure safe working?										
21	Has fire suppression equipment, other valves or inlets which could allow other materials to enter been inspected & isolated?										
22	Have all risk of falling object in the confined space have been removed?										
23	Is competent supervision provided & a nominated emergency watchperson present throughout the duration of the work?										
24	Have any hazardous gases present been identified and appropriate monitoring equipment been provided?										
25	Is a safe atmosphere ensured? If not, complete an atmosphere test & enter measuring results for appropriate gases below.										
26	Are sources of lighting and levels of lighting safe and appropriate for the working atmosphere?										
Are any other precautions required to be included? Any other safety equipment required?											
before the Operation											
OXIDISE	Value:	Pass / Fail	MIDDLE OF OPERATION	Value:	Pass / Fail	END OF OPERATION	Value:	Pass / Fail	CARBON MONOXIDE	Value:	Pass / Fail
CARBON MONOXIDE	Value:	Pass / Fail	CARBON MONOXIDE	Value:	Pass / Fail	CARBON MONOXIDE	Value:	Pass / Fail	CARBON MONOXIDE	Value:	Pass / Fail
H2S	Value:	Pass / Fail	H2S	Value:	Pass / Fail	H2S	Value:	Pass / Fail	H2S	Value:	Pass / Fail
COMBINED EXPLOSIVES	Value:	Pass / Fail	COMBINED EXPLOSIVES	Value:	Pass / Fail	COMBINED EXPLOSIVES	Value:	Pass / Fail	COMBINED EXPLOSIVES	Value:	Pass / Fail
OTHER (SPECIFY)	Value:	Pass / Fail	OTHER (SPECIFY)	Value:	Pass / Fail	OTHER (SPECIFY)	Value:	Pass / Fail	OTHER (SPECIFY)	Value:	Pass / Fail
OTHER (SPECIFY)	Value:	Pass / Fail	OTHER (SPECIFY)	Value:	Pass / Fail	OTHER (SPECIFY)	Value:	Pass / Fail	OTHER (SPECIFY)	Value:	Pass / Fail
In case of FAIL Value or in case of GAS DETECTOR ALARM, STOP THE OPERATION and LEAVE CONFINED SPACE IMMEDIATELY.											
<b>AUTHORISATION ACCEPTANCE</b>											
I confirm that I have verified the above information and ensured that the necessary precautions have been taken. In case of additional high risk activities, I have completed the additional permit to work (Hot Work, Electrical or Work at Height Permit to work). I confirm confined space work cannot be avoided so a safe system of work has been agreed and will be followed. It is safe to carry out the work as defined above and the permit information has been explained to all workers involved. I accept responsibility for the work to be completed as agreed. <b>NOTE: WHERE CONTINUOUS ATMOSPHERIC MONITORING IS NEEDED, THE WATCHPERSON PERFORMS THIS TASK.</b>											
*Any "No scoring" in the precaution checks must have been solved prior to Permit to Work acceptance.											
I confirm that I have verified the above information and ensured that the necessary precautions have been taken. It is safe to carry out the work as defined											
Responsible	Name	Company	Signature	PERMIT STARTS	Day	Month	Year				
Permit Issuer					Hour	Min					
Person In-Charge											
Person Acceptor											
Watch Person											
Working Party-1											
Working Party-2											
Working Party-3											
Working Party-4											
<b>HANDOVER</b>											
I confirm that the work has not been completed and I'm handing the task over.											
Responsible	Name	Company	Signature								
Permit Issuer											
Permit Acceptor											
Watch Person											
I confirm that I have been briefed and reviewed the current status of the work area and accept the controls in place.											
Responsible	Name	Company	Signature								
New Permit Issuer											
New Permit Acceptor											
New Watch person											
<b>HAND BACK AND CANCELLATION</b>											
I confirm that the work has been completed/partially completed, checked by myself, and area is safe and tidy conditions. (*delete as appropriate)											
Permit Acceptor	Name:	Date	Hour	Min	Signature:						
I have inspected the completed/partially completed* after work and hereby cancel this permit. (*delete as appropriate)											
Watch Person	Name:	Date	Hour	Min	Signature:						
Permit Issuer	Name:	Date	Hour	Min	Signature:						
<b>TASK OVERVIEW / SAFE SYSTEM OF WORK (List Steps in order)</b>											
STEP 1											
STEP 2											
STEP 3											
STEP 4											
STEP 5											
STEP 6											
STEP 7											
<b>RISK ASSESSMENT</b>											
STEP	WHAT COULD GO WRONG ? (MACHINE, EQUIPMENT, PEOPLE ORGANISATION, ENVIRONMENT)	HOW COULD IT HURT SOMEBODY ? (INCLUDING WHO CAN BE HARMED) - WITHOUT ANY CONTROLS.	CONTROLS (COLLECTIVE PROTECTION, PPE, INSTRUCTION, TRAINING, VISUALISATION, OTHERS)	IMPLEMENTED ?							
<b>EMERGENCY / RESCUE PLAN</b>											
RESCUE PLAN A :											
RESCUE PLAN B (IN CASE PLAN A FAILS) :											
<b>AUDIT (At least one per shift)</b>											
WHO		DATE									
ACTION TO BE IMPLEMENTED		WHO		WHEN							
ACTION TO BE IMPLEMENTED		WHO		WHEN							
ACTION TO BE IMPLEMENTED		WHO		WHEN							



**Permit to Work (PTW)      Permit No:**

**HOT WORK**

Work location where PTW is required:

Summary of work to be undertaken:

Cross Reference Number of any other existing PTW (if any) which may affect this PTW (YES/ NO)      Reference No of PTW

One PTW per job (not for multiple jobs). For clarification of any doubt please consult your manager.

This permit will be counted **VALID** under following conditions:

- All sections are filled up and completed in all respect truthfully.
- When "NO SCORING" from checklist (below) has been solved without compromise.
- When authorized by the relevant persons involved in this PTW.

**PRE CHECK-LIST**

(To be filled up by the Permit ISSUER at the spot where work will be executed, involving the Permit Acceptor & other stake holders)

	YES	NO	N/A
1 Has a risk assessment on the shopfloor been carried out? And a safe system of work been proposed and all interested parties trained in ensuring they follow this?			
2 Are emergency arrangements agreed & formally in place in the event of a need to rescue or safely remove of an injured person?			
3 Are the persons involved in the job qualified to undertake hot work?			
4 Presence of a fire extinguisher within 5m that would be accessible in the event of a fire?			
5 No flammable or combustible materials within 10m (in 3 dimensions), unless damped down, protected or separated by with a wall or fireproof protection			
6 2nd person present acting as a continuous watch for a period determined by risk assessment including at minimum 30 minutes after the work has been completed, if in a specifically dedicated hot work area free from all combustible material; in any other situation (area not specifically dedicated to hot work or presence of combustibles).			
7 All persons in the hot work area wearing adequate PPE			
8 The person carrying out the task and the 2nd person (watch) must be trained to use a fire extinguisher			
9 Adequate measures to protect others from welding arc flash			
10 Is the area properly isolated to remove any risk for external people to the hot work?			
11 Is there proper ventilation provided to remove fumes?			
12 Is the hot work equipment to be used in good condition and fit for purpose?			
13 Is competent supervision provided?			
14 Has the Fire procedure been explained?			
15 Neighbouring areas assessed for risk of heat transfer?			
16 Maintain fire detection and suppression systems in service; in the exceptional cases where they must be impaired, Group insurers must be informed before the activity starts, and additional precautions taken based on a risk assessment			
17 Has information been obtained to ensure that there are no Asbestos Containing Materials present?			
18 Is an atmosphere test required? If yes, please complete session below.			

Before the Operation      Hour      By      Middle of Operation      Hour      By      End of the Operation      Hour      By

	Value:	Pass / Fail		Value:	Pass / Fail		Value:	Pass / Fail
OXYGEN			OXYGEN			OXYGEN		
CARBON MONOXIDE			CARBON MONOXIDE			CARBON MONOXIDE		
H2S			H2S			H2S		
COMBINED EXPLOSIVES			COMBINED EXPLOSIVES			COMBINED EXPLOSIVES		
OTHER (SPECIFY)			OTHER (SPECIFY)			OTHER (SPECIFY)		
OTHER (SPECIFY)			OTHER (SPECIFY)			OTHER (SPECIFY)		

**In case of FAIL Value or in case of GAS DETECTOR ALARM, STOP THE OPERATION and LEAVE CONFINED SPACE IMMEDIATELY.**

Are any other precautions required to be included?

Any other safety equipment required?

**AUTHORISATION ACCEPTANCE**

I confirm that I have verified the above information and ensured that the necessary precautions have been taken. In case of additional high risk activities, I have completed the additional permit to work (Hot Work, Electrical or Work at height Permit to work). I confirm confined space work cannot be avoided so a safe system of work has been agreed and will be followed. It is safe to carry out the work as defined above and the permit information has been explained to all workers involved. I accept responsibility for the work to be completed as agreed. **NOTE: WHERE CONTINUOUS ATMOSPHERIC MONITORING IS NEEDED, THE WATCHPERSON PERFORMS THIS TASK.**

Any "No scoring" in the precaution checks must have been solved prior to Permit to Work acceptance.

I confirm that I have verified the above information and ensured that the necessary precautions have been taken. It is safe to carry out the work as defined

Responsible	Name	Company	Signature	PERMIT STARTS
Permit Issuer				Day    Month    Year Hour    Min
Person In-Charge				
Person Acceptor				PERMIT EXPIRES
Watch Person				Day    Month    Year Hour    Min
Working Party-1				
Working Party-2				
Working Party-3				Duration of Job:
Working Party-4				

**HANDOVER**

I confirm that the work has not been completed and I'm handing the task over.

Responsible	Name	Company	Signature
Permit Issuer			
Permit Acceptor			
Watch Person			

I confirm that I have been briefed and reviewed the current status of the work area and accept the controls in place.

Responsible	Name	Company	Signature
New Permit Issuer			
New Permit Acceptor			
New Watch person			

**HAND BACK AND CANCELLATION**

I confirm that the work has been completed/partially completed, checked by myself, and area is safe and tidy conditions. (\*delete as appropriate)

Permit Acceptor      Name:      Date:      Hour      Min      Signature:

I have inspected the completed/partially completed\* after work and hereby cancel this permit. (\*delete as appropriate)

Watch Person      Name:      Date:      Hour      Min      Signature:

Permit Issuer      Name:      Date:      Hour      Min      Signature:

**TASK OVERVIEW / SAFE SYSTEM OF WORK (List Steps in order)**

<b>STEP 1</b>	
<b>STEP 2</b>	
<b>STEP 3</b>	
<b>STEP 4</b>	
<b>STEP 5</b>	
<b>STEP 6</b>	
<b>STEP 7</b>	

**RISK ASSESSMENT**

STEP	WHAT COULD GO WRONG ? (MACHINE, EQUIPMENT, PEOPLE ORGANISATION, ENVIRONMENT)	HOW COULD IT HURT SOMEBODY ? (INCLUDING WHO CAN BE HARMED) - WITHOUT ANY CONTROLS.	CONTROLS (COLLECTIVE PROTECTION, PPE, INSTRUCTION, TRAINING, VISUALISATION, OTHERS)	IMPLEMENTED ?

**EMERGENCY / RESCUE PLAN**

RESCUE PLAN A:

RESCUE PLAN B (IN CASE PLAN A FAILS):

**AUDIT (At least one per shift)**

WHO	DATE
ACTION TO BE IMPLEMENTED	WHO:      WHEN:
ACTION TO BE IMPLEMENTED	WHO:      WHEN:
ACTION TO BE IMPLEMENTED	WHO:      WHEN:



Permit to Work (PTW)						Permit No:		
ELECTRICAL								
Work location where PTW is required:								
Summary of work to be undertaken:								
Cross Reference Number of any other existing PTW (if any) which may affect this PTW (YES/ NO)						Reference No of PTW		
One PTW per JOB (Not for multiple jobs). For clarification of any doubt please consult your manager.								
This permit will be counted <b>VALID</b> under following conditions:								
A. When all sections are filled up and completed in all respect truthfully.								
B. When <b>"NO SCORING"</b> from checklist (below) has been solved without compromise.								
C. When authorized by the relevant persons involved in this PTW.								
PRE CHECK-LIST								
(To be filled up by the Permit ISSUER at the spot where work will be executed, involving the Permit Acceptor & other stake holders)								
		YES	NO	N/A				
1	Has a risk assessment on the shop/floor been carried out? And a safe system of work been proposed and all interested parties trained in ensuring they follow this?							
2	Are emergency arrangements agreed & formally in place in the event of a need to rescue or safely remove of an injured person?							
3	Are the persons involved in the job, qualified & trained to undertake electrical work?							
4	Has the relevant department been advised of isolation?							
5	Has the electrical supply been switched off? LTT implemented?							
6	CO2 Fire extinguisher available and personnel trained in use of extinguishers?							
7	Is a voltage detection instrument required?							
8	Is appropriate earthing or grounding in place as needed?							
9	Does the high Voltage working require a second electrician as watch man?							
10	Are caution/danger signs displayed appropriately and area cordoned off ?							
11	Is a defibrillator immediately accessible?							
12	Is the lighting appropriate to undertake the work safely?							
13	To complete the work safely, if circuit breakers are required please state where and why?							
14	To complete the work safely if insulating mats/screen are required please state where and why?							
15	If needed, is the insulator Logged off/ Tagged off safely?							
16	Has any Risk associated with insulating or other materials within the building panels considered?							
17	Has a test for been undertaken identifying any equipment which is not live been conducted?							
18	For high voltage work, is a second electrician present in case of emergency requirements?							
Are any other precautions required to be included?								
Any other safety equipment required?								
AUTHORISATION ACCEPTANCE								
I confirm that I have verified the above informations and ensured that the necessary precautions have been taken. In case of additional high risk activities, i have completed the additional permit to work (Hot Work, Electrical or Work at height Permit to work). I confirm confined space work cannot be avoided so a safe system of work has been agreed and will be followed. It is safe to carry out the work as defined above and the permit information has been explained to all workers involved. I accept responsibility for the work to be completed as agreed. <b>NOTE: WHERE CONTINUOUS ATMOSPHERIC MONITORING IS NEEDED, THE WATCHPERSON PERFORMS THIS TASK.</b>								
* Any "No scoring" in the precaution checks must have been solved prior to Permit to Work acceptance.								
I confirm that I have verified the above informations and ensured that the necessary precautions have been taken. It is safe to carry out the work as								
<b>Responsible Persons</b>	<b>Name</b>	<b>Company</b>	<b>Signature</b>	<b>PERMIT STARTS</b>				
Permit Issuer				Day	Month	Year		
Person In-Charge				Hour	Min			
Person Acceptor				<b>PERMIT EXPIRES</b>				
Watch Person				Day	Month	Year		
Working Party-1				Hour	Min			
Working Party-2				<b>Duration of Job:</b>				
Working Party-3								
Working Party-4								
HANDOVER								
I confirm that the work has not been completed and I'm handing the task over.								
<b>Responsible Persons</b>	<b>Name</b>	<b>Company</b>	<b>Signature</b>	Day:	Month	Year		
Permit Issuer				Hour	Min			
Permit Acceptor								
Watch Person								
I confirm that that I have been briefed and reviewed the current status of the work area and accept the controls in place.								
<b>Responsible Persons</b>	<b>Name</b>	<b>Company</b>	<b>Signature</b>	Day:	Month	Year		
New Permit Issuer				Hour	Min			
New Permit Acceptor								
New Watch person								
HAND BACK AND CANCELLATION								
I confirm that the work has been completed/partially completed*, checked by myself, and area is safe and tidy conditions. (*delete as appropriate)								
Permit Acceptor	Name:	Date	Hour	Min	Signature :			
Watch Person	Name:	Date	Hour	Min	Signature :			
Permit Issuer	Name:	Date	Hour	Min	Signature :			
RISK ASSESSMENT								
<b>STEPS</b>	WHAT COULD GO WRONG ? (MACHINE, EQUIPMENT, PEOPLE, ORGANISATION, ENVIRONMENT)	HOW COULD IT HURT SOMEBODY ? (INCLUDING WHO CAN BE HARMED) - WITHOUT ANY CONTROLS.	CONTROLS (COLLECTIVE PROTECTION, PPE, INSTRUCTION, TRAINING, VISUALISATION, OTHERS)	IMPLEMENTED ?				







