

Brady Plant

Confined Space Entry Permit

This permit must be kept near the confined space until the job is complete.

Confined Space: **Waste Water Facility EQ Storage Tank - Brady CS Example**
North End Tank 1 Example Brady

Hazards: Hazardous energy; Crushing, engulfment or entrapment; Slip/Trip/Fall

Purpose of Entry:

Scheduled Start:

Entry Supervisor:

Permit Expires:

Permit Granted:

Emergency Phone Number: Call 911 - KNOW YOUR LOCATION for Tank-0001B ENTRY.

Do not enter space to attempt rescue. Follow Company X rescue plan XXX.

Rescue Equipment Checklist

Ladder

PPE Checklist

Hard Hat

Boots

Protective Clothing

Eye/Face Protection

Gloves

Other: Calibrated 4-Gas Meter (REQUIRED FOR ALL ENTRIES)

Pre-Entry Checks

All personnel have been trained for confined space entry.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Specific space entry procedure prepared and reviewed.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
All personnel have been informed of potential hazards.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Entry procedures have been reviewed.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Emergency procedures have been reviewed.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Affected employees, host employer and/or contractor notified.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Attendant stationed at entrance and properly instructed and trained.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Entry area is free of debris and objects.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
All energy sources have been isolated/locked out.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Needed warning barriers and signs are in place.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The confined space has been drained and flushed/purged.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hand tools, power tools, lighting, and fans are intrinsically safe for the work area.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ground fault circuit interrupters (GFCI) provided.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Verify communication device(s).	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Pre-Entry Checks

Oxygen: 19.5% to 23.5% _____ %

Comments:

Entry Authorization

I, the undersigned, certify that all actions and/or conditions for safe entry have been performed.

NAME/DATE (Please print)	SIGNATURE
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Entrants

#	Name	Time In / Out	Time In / Out	Time In / Out	Time In / Out
		/	/	/	/
		/	/	/	/

Attendants

#	Name	Start Time	Stop Time

Atmospheric Monitoring

Record the measurements approximately every 10 minutes

Test	Time:	Time:	Time:	Time:	Time:	Time:	Time:	Time:

Entry Complete

I, the undersigned, certify that entry has been completed and all entrants have left the space.

NAME/DATE (Please print)	SIGNATURE
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Return to:

Scan and attach the completed form when closing this permit in LINK360.