

Cold Work Permit

Location		Date		
Line No.		Time	From	Till
Description of work		Type of work		
		<input type="checkbox"/>	Painting	
.....		<input type="checkbox"/>	Insulation	
		<input type="checkbox"/>	Mechanical Work	
.....		<input type="checkbox"/>	Aligning Equipment	
		<input type="checkbox"/>	Cabling Activities	
.....		<input type="checkbox"/>	Field Connection Activities	
		<input type="checkbox"/>	Miscellaneous Civil Work	

Preparation					Personal Protection (Check prior to start of work)				
Apparatus rinsed with water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Goggles/shield	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Liquid free	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Neoprene overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Purged with steam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Self-contained breathing apparatus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Purged with nitrogen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mask/escape mask	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Continuous purge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Safety harness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gas free	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves (PVC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fire hose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gum boots	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Radioactive source protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment earth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Barriers placed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment locked out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Names/Signatures for Work Approval/Correct Implementation			
Supervisor Subcontractor	Name	Company Discipline Specialist	Name
	Signature		Signature
Foreman Subcontractor (+ men)	Name	Final Check (Company Safety)	Name
	Signature		Signature

Full responsibility for instructions received with this permit is accepted by subcontractor's supervisor. It is HIS obligation to pass on all relevant information to his executing foreman and his men.

Permit is to be handed into the Company issuing authority at the end of EACH workday.