



Confined Space Entry Permit

General

Location:	Date:
Purpose:	Time:
Hazards:	Permit Expires:

Atmosphere Testing

Time								
Oxygen (19.5-23%)								
Combustible gas (<10% LEL)								
Hydrogen Sulfide (15 ppm)								
Carbon Monoxide (35 ppm)								
Other								

Special Requirements

Area Secured	Protective Clothing	Eye Protection	Lighting	Hard hat
Lockout/Tagout	Fire Extinguisher	Gloves	Constant Monitor	Ventilation
Escape Harness	Line Isolated	Fire Dept. Notified	Hot Work Permit	Radio
Base Notified	Lifeline	SCBA	Respirator	Noise Protection

Personnel

In Charge:				
Gas Tester:				
Attendant:				
Entrant:				
Entrant:				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Emergency Contacts</td> <td style="width: 25%;">EMS, FIRE: 911</td> <td style="width: 25%;">Campus Police: 5500</td> <td style="width: 25%;">Safety: 7790</td> </tr> </table>	Emergency Contacts	EMS, FIRE: 911	Campus Police: 5500	Safety: 7790
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