

UB HOT WORK PERMIT

Permit #:	Issue Date:	Expiration Date:	Time:
Work Order #:	Work Start Date:	Work Completion Date:	Time:
Location of Work		Work Being Performed	
Building Name: _____ Location: _____ _____		<input type="checkbox"/> Welding <input type="checkbox"/> Cutting <input type="checkbox"/> Brazing <input type="checkbox"/> Soldering <input type="checkbox"/> Other Project Name: _____ Describe Work: _____	
Authorized Personnel			
Job Forman/Supervisor:		Phone	Pager Cell-phone
Operator(s):		Helper:	
FP&D Project Manager:		Fire Watch:	

Safety Precautions	Done	N/A
Ensure that all equipment used for this work is in proper working order.	()	()
Post warning signs to prevent others from accessing work area or from exposure to smoke or arc.	()	()
Emergency exits available	()	()
Ensure that no other hazardous operations in progress	()	()
Other affected/involved personnel advised of operation and hazards	()	()
Vessels, equipment drained, purged, ventilated and/or cleaned (i.e. hot tap work on tank, pipes or containers containing flammable liquids shall be certified and purged prior to hot tap).	()	()
Appropriate PPE provided/worn	()	()
Supervisor notified of work location, time of operation and nature of hot work to be performed.	()	()
Ensure that proper ventilation is maintained in the work area throughout the operation.	()	()
Prevent smoke from traveling to other parts of the building.	()	()
Checked building/area air currents and/or outdoor wind direction	()	()
Ensure that all combustible material is no less than 35 ft. from the operation.	()	()
Ensure that all flammable material is no less than 50 ft. from the operation.	()	()
Non-movable combustibles/flammables isolated, covered or shielded with fire retardant material	()	()
Floors swept clean of combustibles	()	()
Horizontal/vertical openings within 35 feet sealed or covered for spark/vapor control	()	()
Heat transfer, conduction, radiation adequately controlled	()	()
Ensure that fire detection systems will not be accidentally activated by hot work operation.	()	()
Fire alarm system appropriately modified to prevent false alarms and occupants notified	()	()
Proper fire extinguishers (10 lbs ABC minimum) available, operational and operators trained in their use	()	()
Provide a firewatch during the operation and for 30 minutes after work has been stopped.	()	()
All operations personnel made aware of the fire evacuation and fire reporting procedures of the facility.	()	()
If lockout/tagout is required - <input type="checkbox"/> Yes <input type="checkbox"/> No Program used -	()	()
If hot work to be performed in a confined space, a confined space entry permit obtained	()	()
All operations personnel are aware of the fire evacuation and fire reporting procedures	()	()

Authorization and Approval by Supervisor

I hereby certify that all necessary precautions have been taken to ensure the safety of this operation. This permit is valid only as long as work conditions existing at the time of issuance continue. Any change in condition that adversely affects safety in the work area while work is in progress shall cause the permit to expire. Safety precautions are now in place and I authorize the work to be performed. The permit will be posted on the job site.

Name: _____

Print Sign Date

Title: _____ Permit Issued by: _____
Date _____

Emergency Notification: UB Police 645-2222 UB Customer Service 645-2025 or 71 on Campus phones
Environment Health & Safety 829-3301
Post Original at Job Site – Fax Copy to EH&S at 829-2516