

Confined Space Entry Permit

Arizona State University Confined Space Entry Permit

Permit valid for issued work shift only. This permit shall remain on site until job is completed.

Date and time permit issued: _____ Date and time permit expires: _____

Job location: _____

Supervisor(s) in charge of crew: _____ Phone number: _____

Entry supervisor: _____

Attendant: _____

Authorized entrant(s): _____

Equipment to be worked on: _____

Communication procedures: _____

Rescue procedures: Dial 911 and ask for ASU Police or call ASU Police at 480-965-3456

Entry checklist to be completed and reviewed prior to entry

	Yes	No	N/A
Requirements completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lock out/de-energize/try-out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lines broken-capped-blank – utility pipes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleaning, purging, flushing or ventilation – procedure if needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation – forced air ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secure area – mark off area from non-authorized entrants'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respirators – Air purifying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standby safety personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full body harness with D ring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency escape retrieval equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lifelines – cable, rope, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protective clothing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Burning and welding permit – hot work permit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Direct reading gas monitor – calibrated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Atmospheric monitoring

Record initial and continuous monitoring results every hour.

Gas monitor make: _____ Gas monitor model: _____ Gas monitor serial number: _____

Time							
Oxygen (Acceptable 19.5% thru 23.5%)							
LEL (Acceptable <10%)							
CO (Acceptable <35ppm)							
H ₂ S (Acceptable <10ppm)							

Rescue procedures: Dial 911 and ask for ASU Police or call ASU Police direct at 480-965-3456

Entry supervisor – print and sign name _____

Attendant – print and sign name _____

This permit must be posted at the job site. Return job site copy to Environmental Health and Safety following job completion.