

## Energy Control Procedure Form

Reference No: \_\_\_\_\_

Prepared by (Name/Title): \_\_\_\_\_

Date of Completion: \_\_\_\_\_

Approved by (Name/Title): \_\_\_\_\_

Approval Date: \_\_\_\_\_

### 1. Machine/Equipment Identification

General Description/Manufacturer: \_\_\_\_\_

Model: \_\_\_\_\_ Serial No. \_\_\_\_\_

Location: \_\_\_\_\_

List serial numbers of machines/equipment where this same procedure would apply (equipment of a similar type with similar energy sources).

Model	Serial No.	Location

### 2. Operator Controls

What switches, breakers, buttons, etc. are available to an operator of this equipment. This information is instrumental in identifying energy sources and lockout/tagout capacity.

List of operator controls:

### 3. Energy Sources\*

Check the following as applicable:

Electrical \_\_\_\_\_ Hydraulic \_\_\_\_\_ Natural Gas \_\_\_\_\_

Pneumatic \_\_\_\_\_ Other \_\_\_\_\_

Stored Energy \_\_\_\_\_ (Explain) \_\_\_\_\_

Energy Source Identification and Location (Specific)	Lockable? Yes/No	Type of Energy Control Device to be Used
a.		
b.		
c.		
d.		
e.		

*\*Some equipment/machines are very complex. If efforts to identify adequate source control is unsatisfactory, a qualified electrician (or other appropriate person) should evaluate and identify all necessary source controls to de-energize.*

### 4. Shutdown Procedures

List in order the steps required to de-energize and secure the equipment/machine. This information must detail each step clearly. If stored energy is involved (pressure, residual electricity) steps to dissipate or secure this energy should be included.

Shutdown Step	Will De-Energized State be Verified? Yes/No? Explain.	Lockout/Tagout Type & Location
1.		
2.		
3.		
4.		
5.		

5. Restart Procedure

List the steps in order required to re-energize/release the equipment for use. Include appropriate cautions for personnel to ensure they are clear during any testing or activation during a particular step.

Restart Step	Energy Source Activated
1.	
2.	
3.	
4.	
5.	

6. Affected and Authorized Employees

Affected Employee Name	Job Title
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9	
10.	

Authorized Employee Names	Job Title
1.	
2.	
3.	
4.	
5.	

