

CONFINED SPACE ENTRY PERMIT

Issue Date: 5/9/12
 Issue Time: 0:00 PM

School Name: Madison Elementary
 Confined Space: Boiler 2

Expiration Date: 5/9/12
 Expiration Time: 1:00 PM

Entry Personnel: Steve Keller
 Standby Personnel: Jane Nixon

NOTE: DURATION OF PERMIT IS NOT TO EXCEED 8 HOURS FOR ENTRY INTO A CONFINED SPACE.

Atmospheric Checks Time: 2 am/pm
 Oxygen: 20.9 % (19.5%-22.5%)
 Combustible: 0 % L.E.L. (<10% CH₄)
 Toxic: 0 ppm (<10% H₂S)
 Carbon Monoxide: 0 ppm (<35ppm)

Tester's Name and Signature: Jane Nixon

<u>Isolation of Pumps or Lines</u>	Yes	No	N/A
Pumps or lines blocked, blanked, or disconnected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<u>Ventilation</u>	Yes	No	N/A
Mechanical	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Natural ventilation only	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Atmospheric Checks after Isolation and/or Ventilation (if necessary)

Oxygen: _____ % (19.5%-22.5%)
 Combustible: _____ % L.E.L. (<10% CH₄)
 Toxic: _____ ppm (<10% H₂S)
 Carbon Monoxide: _____ ppm (<35ppm)

Tester's Name and Signature: _____

<u>Equipment</u>	Yes	No	N/A
Calibrated 4-gas meter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety harness/lifelines	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Communication equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper PPE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical/retrieval devices	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Electrical tools/lighting/non-spark tools	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

We have reviewed the work authorized by this permit and the information contained herein. Written instructions and safety procedures have been received and reviewed. This permit is not valid unless all appropriate items are completed and understood.

Prepared by: Jane Nixon (print) _____ (sign)

Approved by: _____ (print) _____ (sign)

CONFINED SPACE ENTRY PERMIT

Issue Date: 5/9/12 School Name: Madison Elementary
Issue Time: 2:00 PM Confined Space: Boiler 2
Expiration Date: 5/9/12 Entry Personnel: Steve Koller
Expiration Time: 10: PM Standby Personnel: Janice Nixon

NOTE: DURATION OF PERMIT IS NOT TO EXCEED 8 HOURS FOR ENTRY INTO A CONFINED SPACE.

Atmospheric Checks Time: 2 am/pm
Oxygen: 20.9 % (19.5%-22.5%)
Combustible: 0 % L.E.L. (<10% CH₄)
Toxic: 0 ppm (<10% H₂S)
Carbon Monoxide: 0 ppm (<35ppm)

Tester's Name and Signature: Janice Nixon

<u>Isolation of Pumps or Lines</u>	Yes	No	N/A
Pumps or lines blocked, blanked, or disconnected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<u>Ventilation</u>	Yes	No	N/A
Mechanical	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Natural ventilation only	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Atmospheric Checks after Isolation and/or Ventilation (if necessary)

Oxygen: _____ % (19.5%-22.5%)
Combustible: _____ % L.E.L. (<10% CH₄)
Toxic: _____ ppm (<10% H₂S)
Carbon Monoxide: _____ ppm (<35ppm)

Tester's Name and Signature: _____

<u>Equipment</u>	Yes	No	N/A
Calibrated 4-gas meter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety harness/lifelines	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Communication equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper PPE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical/retrieval devices	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Electrical tools/lighting/non-spark tools	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

We have reviewed the work authorized by this permit and the information contained herein. Written instructions and safety procedures have been received and reviewed. This permit is not valid unless all appropriate items are completed and understood.

Prepared by: Janice Nixon (print) _____ (sign)
Approved by: _____ (print) _____ (sign)