Doc No: MHCPL-EHS-PTW-13

Permit To Work Report - Blasting Work (Permit UID - APA/APS/ABCCON/BL/0027)

Permit Information

Type of permit	Name of project/site	Contractor company	Name of client/contractor
Blasting Work	Aparna New Site	Abc Constructions	Kohli OSM

Work Information

Start date / Close Date	1/9/2025 12:00:00 AM / 1/9/2025 12:00:00 AM	**Work location**	
Start time / End time	1/9/2025 7:43:00 PM / 1/9/2025 9:00:00 PM	**Reference permit no.**	
No. of workers	NA	**Tools/ equipment to be used**	
Scope of work			
Description of work			

Sections

Fly Rock ☐	Dust ☐	Fumes ☐	Toxic Gases ☐
Miss-Fires ☐	Explosion ☐	Fire ☐	Vibration ☐
Noise ☐	Other Hazards:		

Licensed Blaster ☐	Blasting NOC ☐	Blasting Siren ☐	HIRA Undertaken ☐
Signage's Provided ☐	Blasting SOP ☐	Controlled Blasting ☐	Separate Containers for Explosive & ED's ☐
Awareness on expected emergencies ? ☐	Other Precautions:		

Topics discussed:	Attach photo: 0

Safety Shoes ☐	Ear Plugs / Muffs ☐	Reflective Vest ☐	Hand Gloves ☐
Nose Mask ☐	Goggles ☐	Other PPEs:	

The blaster must possess a valid license.: **No**	Explosive to be transported in road, in an Explosive van.: **No**	Explosive should not be carried in the same vehicle with detonators.: **No**	Vehicle should be equipped with a non-sparking metal or wooden floor.: **No**
Do not use damaged/deteriorated explosives and accessories.: **No**	No holes should be loaded except those that are to be fired in the next round of blasting. Holes loaded during one shift should be fired on the same shift.: **No**	Post guards with red flags at a safe distance around the site to prevent persons approaching the danger area inadvertently while the shots are being fired.: **No**	Ensure to handle miss-fires by authorised blaster.: **No**
Carryout blasting is in day light hours only.: **No**	All Blasting's should be controlled/muffed blasting's.: **No**		

Approval and authorization

Requestor	Issuer	Approver	Reviewer
Name: Kohli OSM **Phone**: +917993748762 **Requested On**: 09-Jan-2025 07:43:50 PM	**Name**: NA **Phone**: NA **Issued On**: NA	**Name**: NA **Phone**: NA **Approved On**: NA	**Name**: NA **Phone**: NA **Reviewed On**: NA

Permit To Work History

NA

Created On	Created By	Comment	Attachments