



Doc No: MHCPL-EHS-PTW-11

**Permit To Work Report - Confined Space Entry (Permit UID - APA/LAK/ABCCON/CS/0001)**

**Permit Information**

Type of permit	Name of project/site	Contractor company	Name of client/contractor
Confined Space Entry	Lakshmana Site	Abc Constructions	Test User laLIT - LIKEGH

**Work Information**

Start date / Close Date	12/3/2024 12:00:00 AM / 12/3/2024 12:00:00 AM	Work location	workafella
Start time / End time	12/3/2024 12:03:00 PM / 12/3/2024 6:00:00 PM	Reference permit no.	
No. of workers	194	Tools/ equipment to be used	laptop
Scope of work	development		
Description of work	create applications		

**Sections**

**Hazards**

Oxygen Deficiency <input type="checkbox"/>	Oxygen Enrichment <input checked="" type="checkbox"/>	Arcing / Flash <input type="checkbox"/>	Electrical Shock <input type="checkbox"/>
Fire <input type="checkbox"/>	Explosion <input checked="" type="checkbox"/>	Toxic Gases / Fumes <input type="checkbox"/>	Person Fall <input checked="" type="checkbox"/>
Equipment fall <input checked="" type="checkbox"/>	Other Hazards:		

**Precautions Taken**

ISOLATION <input type="checkbox"/>	LOTO Applied <input checked="" type="checkbox"/>	Ventilation Provided <input type="checkbox"/>	HIRA Undertaken <input type="checkbox"/>
Signage's Provided <input type="checkbox"/>	SOP <input checked="" type="checkbox"/>	Illumination Provided <input type="checkbox"/>	ELCB / RCCB Provided <input checked="" type="checkbox"/>
Entry Log Register <input type="checkbox"/>	Awareness on expected emergencies ? <input checked="" type="checkbox"/>	Other Precautions:	

**Job Specific PPEs**

Safety Shoes <input type="checkbox"/>	Full Body Harness <input checked="" type="checkbox"/>	Cover All <input checked="" type="checkbox"/>	Filtered Mask <input type="checkbox"/>
Safety Jacket <input type="checkbox"/>	Other PPE's:		

**Emergency**

Tripod <input checked="" type="checkbox"/>	First Aider <input type="checkbox"/>	Emergency Vehicle <input checked="" type="checkbox"/>	Rescue Available <input type="checkbox"/>
Resuscitator <input checked="" type="checkbox"/>	Stretcher / Wheelchair <input checked="" type="checkbox"/>	Multi Gas Detector <input checked="" type="checkbox"/>	Other Requirements:

**Gas Testing**

Percentage of Oxygen Reading (% O2): no	< 19.5 % - Oxygen Deficiency <input type="checkbox"/>	> 22.2% - Oxygen Enrichment <input type="checkbox"/>	Other's:
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**Safety Considerations**

Was oxygen content between 19.5 percent and 23.5 percent?: <b>No</b>	Did you survey the surrounding area to show it to be free of hazards such as drifting vapours from tanks, piping, or sewers?: <b>Yes</b>	Check for any unsafe electrical conditions.: <b>No</b>	Is all portable electrical equipment used inside confined spaces either grounded and insulated, or equipped with RCCB (30 ma)?: <b>Yes</b>
Have the facility emergency and rescue services been notified that a confined space entry is about to be made?: <b>Yes</b>	Trained & experienced work force to be deployed.: <b>NA</b>	Continues supervision must be required.: <b>No</b>	Is all rescue equipment called out in the safe entry procedure available outside the confined space?: <b>No</b>
Is either natural or mechanical ventilation provided prior to confined space entry?: <b>NA</b>	If the confined space is below the ground and near areas where motor vehicles will be operating, is it possible for vehicle exhaust or carbon monoxide to enter the space?: <b>No</b>	Provide safe access to enter & exit.: <b>NA</b>	Is the standby employee appropriately trained and equipped to handle an emergency?: <b>No</b>

Are confined space entrants wearing proper personal protective equipment (i.e., hardhats, boots, etc.)?: **No**

**Toolbox Talks**

Topics discussed:

Attach photo: 0

**Approval and authorization**

Requestor	Reviewer
<b>Name:</b> Test User laLIT - LIKEGH <b>Phone:</b> +919959993362 <b>Requested On:</b> 03-Dec-2024 12:04:48 PM	<b>Name:</b> NA <b>Phone:</b> NA <b>Reviewed On:</b> NA

**Permit To Work History**

Created On	Created By	Comment	Attachments
03-Dec-2024 12:04:48 PM	Test User laLIT - LIKEGH	The status has changed to Requested. Assigned Approver: Kona Sai Prashanth	