

**Permit To Work Report - Blasting Work (Permit UID - APA/SHL/ABCCON/BL/0007)**

**Permit Information**

| Type of permit | Name of project/site | Contractor company | Name of client/contractor |
|----------------|----------------------|--------------------|---------------------------|
| Blasting Work  | Churchgate           | Abc Constructions  | Abhinav Requester         |

**Work Information**

|                         |                                                |                             |  |
|-------------------------|------------------------------------------------|-----------------------------|--|
| Start date / Close Date | 2/4/2025 12:00:00 AM /<br>2/5/2025 12:00:00 AM | Work location               |  |
| Start time / End time   | 2/5/2025 12:53:00 AM /<br>2/4/2025 6:00:00 PM  | Reference permit no.        |  |
| No. of workers          | NA                                             | Tools/ equipment to be used |  |
| Scope of work           |                                                |                             |  |
| Description of work     |                                                |                             |  |

**Sections**

**Hazards**

|                                     |                                                                  |                                |                                      |
|-------------------------------------|------------------------------------------------------------------|--------------------------------|--------------------------------------|
| Fly Rock <input type="checkbox"/>   | Dust <input type="checkbox"/>                                    | Fumes <input type="checkbox"/> | Toxic Gases <input type="checkbox"/> |
| Miss-Fires <input type="checkbox"/> | Explosion <input type="checkbox"/>                               | Fire <input type="checkbox"/>  | Vibration <input type="checkbox"/>   |
| Noise <input type="checkbox"/>      | Signature: <b>Signed by - at</b><br><b>1/1/0001 12:00:00 AM.</b> |                                |                                      |

**Precautions Taken**

|                                                                 |                                       |                                                                                              |                                                                      |
|-----------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| Licensed Blaster <input type="checkbox"/>                       | Blasting NOC <input type="checkbox"/> | Blasting Siren <input type="checkbox"/>                                                      | HIRA Undertaken <input type="checkbox"/>                             |
| Signage's Provided <input type="checkbox"/>                     | Blasting SOP <input type="checkbox"/> | Controlled Blasting <input type="checkbox"/>                                                 | Separate Containers for<br>Explosive & ED's <input type="checkbox"/> |
| Awareness on expected<br>emergencies ? <input type="checkbox"/> | Other Precautions:                    | Signature: <b>Signed by - Sameer</b><br><b>Firewatcher at 2/4/2025</b><br><b>7:25:45 PM.</b> |                                                                      |

**Toolbox Talks**

|                   |                 |
|-------------------|-----------------|
| Topics discussed: | Attach photo: 0 |
|-------------------|-----------------|

**Job Specific PPEs**

|                                       |                                            |                                          |                                      |
|---------------------------------------|--------------------------------------------|------------------------------------------|--------------------------------------|
| Safety Shoes <input type="checkbox"/> | Ear Plugs / Muffs <input type="checkbox"/> | Reflective Vest <input type="checkbox"/> | Hand Gloves <input type="checkbox"/> |
| Nose Mask <input type="checkbox"/>    | Goggles <input type="checkbox"/>           | Other PPEs:                              |                                      |

**Safety Considerations**

|                                                                        |                                                                                                                                                                        |                                                                                                                                                                        |                                                                                  |
|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| The blaster must possess a valid license.: <b>No</b>                   | Explosive to be transported in road, in an Explosive van.: <b>No</b>                                                                                                   | Explosive should not be carried in the same vehicle with detonators.: <b>No</b>                                                                                        | Vehicle should be equipped with a non-sparking metal or wooden floor.: <b>No</b> |
| Do not use damaged/deteriorated explosives and accessories.: <b>No</b> | 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.: <b>No</b> | 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.: <b>No</b> | Ensure to handle miss-fires by authorised blaster.: <b>No</b>                    |
| Carryout blasting is in day light hours only.: <b>No</b>               | All Blasting's should be controlled/muffled blasting's.: <b>No</b>                                                                                                     |                                                                                                                                                                        |                                                                                  |

### Approval and authorization

| Requestor                                                                                                     | Issuer                                                      | Approver                                                      | Reviewer                                                      |
|---------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------------------------|
| <b>Name:</b> Abhinav Requester<br><b>Phone:</b> +917903770676<br><b>Requested On:</b> 05-Feb-2025 12:54:18 AM | <b>Name:</b> NA<br><b>Phone:</b> NA<br><b>Issued On:</b> NA | <b>Name:</b> NA<br><b>Phone:</b> NA<br><b>Approved On:</b> NA | <b>Name:</b> NA<br><b>Phone:</b> NA<br><b>Reviewed On:</b> NA |

### Permit To Work History

| Created On              | Created By         | Comment                                                                          | Attachments |
|-------------------------|--------------------|----------------------------------------------------------------------------------|-------------|
| 05-Feb-2025 12:55:44 AM | Sameer Firewatcher | Section: Precautions Taken Signed by - Sameer Firewatcher at 2/4/2025 7:25:45 PM |             |
| 05-Feb-2025 12:54:18 AM | Abhinav Requester  | The status has changed to Requested. Assigned Issuer: Sagar Issuer               |             |