

**Permit To Work Report - Confined Space Entry (Permit UID - MHC/GRABSR/CS/0012)****Permit Information**

Type of permit	Name of project/site	Contractor company	Name of client/contractor
Confined Space Entry	Grava	BSR Infra Ventures Private Ltd	Lalit Requestor

**Work Information**

Start date / Close Date	3/4/2025 12:00:00 AM / 3/4/2025 12:00:00 AM	Work location	
Start time / End time	3/4/2025 10:33:00 PM / 3/4/2025 10:40:00 PM	Reference permit no.	
No. of workers	NA	Tools/ equipment to be used	
Scope of work			
Description of work			

**Sections****Hazards**

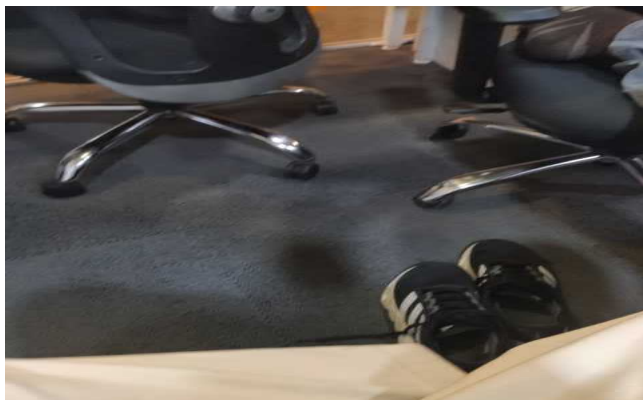
Oxygen Deficiency <input type="checkbox"/>	Oxygen Enrichment <input type="checkbox"/>	Arcing / Flash <input type="checkbox"/>	Electrical Shock <input type="checkbox"/>
Fire <input type="checkbox"/>	Explosion <input type="checkbox"/>	Toxic Gases / Fumes <input checked="" type="checkbox"/>	Person Fall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

**Attachments****Precautions Taken**

ISOLATION <input type="checkbox"/>	LOTO Applied <input type="checkbox"/>	Ventilation Provided <input type="checkbox"/>	HIRA Undertaken <input type="checkbox"/>
Signage's Provided <input type="checkbox"/>	SOP <input 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:	

**Toolbox Talks**

Topics discussed: safety	Attach photo: 1
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**Attachments**

### Job Specific PPEs

Safety Helmet <input type="checkbox"/>	Safety Shoes <input type="checkbox"/>	Full Body Harness <input checked="" type="checkbox"/>	Cover All <input type="checkbox"/>
Filtered Mask <input checked="" type="checkbox"/>	Safety Jacket <input type="checkbox"/>		

### Emergency

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

### Gas Testing

< 19.5 % - Oxygen Deficiency <input checked="" type="checkbox"/>	> 22.2% - Oxygen Enrichment <input checked="" type="checkbox"/>
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### Attachments



### 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>No</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>No</b>
Have the facility emergency and rescue services been notified that a confined space entry is about to be made?: <b>No</b>	Trained & experienced work force to be deployed.: <b>No</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>No</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>No</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.)?: <b>No</b>			

### Approval and authorization

Requester	Issuer	Approver	Reviewer
<b>Name:</b> Lalit Requestor <b>Phone:</b> +919999999990 <b>Time:</b> 04-Mar-2025 10:34:42 PM	<b>Name:</b> Lalit -ISSUER <b>Phone:</b> +919999999900 <b>Time:</b> 04-Mar-2025 10:36:16 PM	<b>Name:</b> Lalit -Approver <b>Phone:</b> +919988778899 <b>Time:</b> 04-Mar-2025 10:37:27 PM	<b>Name:</b> Lalit -Reviewer <b>Phone:</b> +911122112211 <b>Time:</b> 04-Mar-2025 10:40:05 PM

### Permit To Work History

Created On	Created By	Comment	Attachments
04-Mar-2025 10:40:41 PM	Lalit -Reviewer	camera. The status has changed to Re-Approved.	
04-Mar-2025 10:40:28 PM	Lalit -Reviewer	re approve. The status has changed to Re-Approved.	

04-Mar-2025 10:40:19 PM	Lalit -Reviewer	cancel. The status has changed to Cancelled.	
04-Mar-2025 10:40:05 PM	Lalit -Reviewer	The status has changed to Reviewed.	
04-Mar-2025 10:40:05 PM	Lalit -Reviewer	Section: Toolbox Talks Topics discussed - safety Attach photo - 1 Section: Job Specific PPEs Full Body Harness - Checked Filtered Mask - Checked Section: Gas Testing < 19.5 % - Oxygen Deficiency - Checked > 22.2% - Oxygen Enrichment - Checked	
04-Mar-2025 10:37:27 PM	Lalit -Approver	The status has changed to Approved. Assigned Reviewer: Lalit -Reviewer	
04-Mar-2025 10:36:16 PM	Lalit -ISSUER	The status has changed to Issued. Assigned Approver: Lalit -Approver	
04-Mar-2025 10:35:07 PM	Lalit Requestor	safety.	
04-Mar-2025 10:34:56 PM	Lalit Requestor	safety.	
04-Mar-2025 10:34:42 PM	Lalit Requestor	The status has changed to Requested. Assigned Issuer: Lalit -ISSUER	