

**Work Permit Report - (Work Permit UID - WP/TTK/COI/HOK/25/00009)**
**Work Permit Information**

<b>Work Permit UID</b>	WP/TTK/COI/HOK/25/00009	<b>Category Name</b>	
<b>Description</b>		<b>Status</b>	NA
<b>Site Name</b>	Coimbatore	<b>Department Name</b>	Maintenance
<b>Location</b>	NA	<b>Initiated By</b>	Lalit Aditya Kola
<b>Start Date &amp; Time</b>	16-Sep-2025 06:17:00 PM	<b>End Date &amp; Time</b>	19-Sep-2025 02:30:00 AM
<b>Created On</b>	12-Sep-2025 06:22:50 PM	<b>Due Date</b>	18-Sep-2025 12:00:00 AM
<b>Contractor</b>	NA	<b>Shift</b>	NA

**Sections**
**1. Hazards Identified**

Presence of Toxic Gas Fumes <input checked="" type="checkbox"/>	Sharp Edges <input checked="" type="checkbox"/>	Poor Lighting <input type="checkbox"/>	Combustible Materials Nearby <input type="checkbox"/>
Work near Over Head Electrical Line <input type="checkbox"/>	Presence of Flammable Gas <input checked="" type="checkbox"/>	Tripp Hazard <input checked="" type="checkbox"/>	Static Electricity <input checked="" type="checkbox"/>
Flammable Materials Nearby <input type="checkbox"/>	Improper Access <input type="checkbox"/>	Unguarded Opening <input checked="" type="checkbox"/>	Slip Hazard <input checked="" type="checkbox"/>
Steam <input checked="" type="checkbox"/>	Oil Spillage Observed <input type="checkbox"/>	Moving / Running Machinery <input type="checkbox"/>	Confined Space <input type="checkbox"/>
Excavation Collapse <input checked="" type="checkbox"/>	Vibration <input checked="" type="checkbox"/>	Height Work <input type="checkbox"/>	Work on Fragile Roofs <input type="checkbox"/>
Mechanical / Electrical Spark <input type="checkbox"/>	Noise <input checked="" type="checkbox"/>	Pressurized Line <input checked="" type="checkbox"/>	<b>Other Hazard(s):</b> Other hazards are there

**2. Control Measures**

Has the equipment mechanically locked to avoid rotation?: <b>No</b>	Has the insulation of electrical equipment been checked before the work start?: <b>Yes</b>	Have all the hand tools inspected & green tag provided?: <b>Yes</b>	Have all flammable or combustible material been removed from work site (at least 3 meters away)?: <b>No</b>
Has proper ventilation & lighting provided?: <b>No</b>	Is Fire blanket required & provided?: <b>No</b>	Is fire hydrant & fire water pump system in operation: <b>Yes</b>	Is a fire extinguisher available and ready?: <b>No</b>
Is gas monitoring carrying for hot work carrying in flammable storage area?: <b>Yes</b>	Has a fire watch person been assigned while performing hot work? Name.....: <b>NA</b>	If sparks fall to lower levels, has adequate protection been provided?: <b>Yes</b>	Has the work and adjacent areas been isolated with warning tapes and barricades.: <b>No</b>
Flashback arrestor provided on nozzle torch as well as on cylinder regulator: <b>No</b>	Monitor the Hot work area after completing of the work for 1 Hr Name..... Time.....: <b>Yes</b>	Is the people planned for hot work is well experience & trained: <b>NA</b>	Is general safety induction given to the people working in hot work area: <b>No</b>
Is the adequate PPEs listed in Section 3 is available with the work crew: <b>Yes</b>	<b>If any of the above criteria required is not met, then do not issue the work permit.: Criteria is met</b>		

**3. Safety Equipment Requirement & PPE to be used**

Safety Glasses <input checked="" type="checkbox"/>	Nose Mask / Respirators <input checked="" type="checkbox"/>	Safety Harness / Lifeline <input checked="" type="checkbox"/>	Fire Extinguisher No. <input checked="" type="checkbox"/>
Safety Shoes <input checked="" type="checkbox"/>	Hand Gloves <input checked="" type="checkbox"/>	Ear Plug/ Muff <input checked="" type="checkbox"/>	Scaffolds & Ladders <input checked="" type="checkbox"/>
LOTO <input checked="" type="checkbox"/>	Barricades & Warning Signs <input checked="" type="checkbox"/>	Face Shield / Welding Goggle <input checked="" type="checkbox"/>	Helmet <input checked="" type="checkbox"/>
Forced Ventilation <input checked="" type="checkbox"/>	Apron <input checked="" type="checkbox"/>	Any Other: <input checked="" type="checkbox"/>	<b>LOTO Tag Reference No.:</b> TB34YU

**4. Work Permit Authorization**

EHS Officer / Coordinator: NA	Plant Head Only for Hot Work, Roof Work & Confined Space: NA
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**Approvers**

Sequence	Name	Status
1	Bishal Mondal	Approved
2	Lalit Aditya Kola	Approved

**History**

Created On	Created By	Comment	Attachments
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13-Sep-2025 04:12:56 PM	Lalit Aditya Kola	Status has been updated to Extension Partially Approved	
13-Sep-2025 04:12:13 PM	Lalit Aditya Kola	Status has been updated to Extension Partially Approved	
13-Sep-2025 04:04:51 PM	Lalit Aditya Kola	Status has been updated to Extension Partially Approved	
13-Sep-2025 04:04:38 PM	Bishal Mondal	Status has been updated to Extension Partially Approved	
13-Sep-2025 03:56:59 PM	Bishal Mondal	Due Date has been updated to '9/18/2025 12:00:00 AM'	
13-Sep-2025 03:56:59 PM	Bishal Mondal	Status has been updated to Extension Partially Approved	
13-Sep-2025 03:40:13 PM	Bishal Mondal	Status has been updated to Extension Partially Approved	
12-Sep-2025 04:18:57 PM	Lalit Aditya Kola	Status has been updated to Approved	
12-Sep-2025 04:18:50 PM	Bishal Mondal	Status has been updated to Partially Approved	
12-Sep-2025 01:01:32 PM	Sayan Mondal	Status has been updated to Submitted	
12-Sep-2025 12:52:51 PM	Lalit Aditya Kola	A new record was created: Uid set to 'WP/TTK/COI/HOK/25/00009' Work Permit Status Name set to 'Draft'	