

UNIVERSITY OF TENNESSEE KNOXVILLE CONFINED SPACE ENTRY PERMIT FORM

Note: This form must be completed prior to entry of the confined space and posted near the entry opening. Upon completion of the project or expiration of a permit, file this form in your departmental central file and send a copy to EHS.

Part A

Location:	Type of Space:
Reason for Entry:	
Beginning Date: _____	Beginning Time: _____ A.M. P.M.
Ending Date:	Ending Time: _____ A.M. P.M.

Authorized Personnel	
Entrants Names and Department:	Attendants Names and Department

Safety Equipment/Requirements	Yes	No	Personal Protective Equipment	Yes	No
Pipe Lines Purged or Flushed			Air Purifying Respirator Type _____		
Area Secure and Signs Posted (Barricades)			Safety Glasses or Goggles		
Communication Equipment			Hard Hat		
Gas Detector			Chemical Resistant Clothing		
Fire Extinguisher			Protective Boots and/or Gloves		
Ground Fault Circuit Interrupt			Monitoring Equipment		
Lighting (Explosion Proof if needed)			Other		
Lockout/Tagout					
Pipe Lines Capped or Blanked					
Fall Protection					
Ladders					
Non-Sparking Tools					
Mechanical Ventilation					

TESTS PERFORMED:

Time/Date	% LEL (10%)	%O2 (19.5-23.5%)	H2S (PEL 10ppm)	CO (PEL 35ppm)	Tester's Initials	Instrument	Date Instrument Calibrated

Supervisor Authorizing Entry (Name Printed)	Signature	Date	Phone #:
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***Complete back side of this permit (Part B) when work is complete**

Part B

Action	Complete
1. All tools and equipment have been removed from the confined space	
2. All guards, interlocks, caps, safety devices, etc. in the space have been replaced	
3. All entrants have exited the space	
4. All warning signs removed	
5. All confined space entry barriers removed	
6. Confined space entry point has been secured (e.g. door locked, hatch secured, manhole cover replaced)	
7. Lockout/tagout devices (tags, locks, blocks,) removed – if applicable	
8. Notify others that equipment has been returned to service –if applicable	
9. Re-energize equipment (e.g. steam lines, gas lines, electrical lines) if applicable	
10. Sign the confined space entry permit	
11. Other	

Work in the confined space has been completed

Signature of onsite supervisor or last
employee on the job site

Date and time