CONFINED SPACE ENTRY PERMIT
(Steam Plant OPERATIONS)

Where asbestos is present or damaged, stop work, leave the area, and notify your asbestos coordinator. Approval will be required prior to resuming work or re-entry.

Permit Issued: Date: ___________________________ Time: ___________________________
Permit Expires: Date: ___________________________ Time: ___________________________

Note: Entry cannot be authorized for more than 12 hours on this permit, if entry will last more than 12 hours, issue a new permit with an atmospheric test and isolation check.

Space that will be entered: _______________________________________________________

Reason for entering: ___________________________________________________________

Hazards present:
Mechanical hazards _____________________________________________________________
Atmospheric hazards ___________________________________________________________

Name(s) of Entrant(s): ___________________________ ___________________________ ___________________________

Name(s) of Attendant(s): ___________________________ ___________________________ ___________________________

Location of the nearest telephone:
For all entry rescues call BGFD at 383-4831 and WKU Police at 911 (campus phone) or 745-2548 (off campus phones.)

Procedure for summoning help: ___________________________________________________

Have all attendants been informed of the site-specific procedure for summoning help?
☐ Yes
☐ No  If no, stop and inform each attendant of the procedure.

Is the space empty? (Water)
☐ Yes
☐ No  If no, explain (and it better be a really good explanation)

Is the confined space isolated (valves closed, mechanical equipment locked out, etc.?)
☐ Yes
☐ No  If no, entry is not allowed.

Does this space need asbestos abatement before ventilation?
☐ Yes If yes contact your asbestos manager.
☐ No

If no has the space been ventilated for at least 15 minutes? (Ventilation may be natural ventilation)
☐ Yes
☐ No  If no, entry is not allowed.

Has your supervisor been notified that the confined space entry will be going on?
☐ Yes
☐ No  If no, stop and notify your supervisor about the confined space entry.
**Confined Space Entry Permit**

(Steam Plant Operations)

Is Hot Work Permit required?
- [ ] No
- [x] Yes  If yes, stop and obtain Hot Work Permit

Will entrant(s) be required to wear a harness/lifeline?
- [x] Yes
- [ ] No  If no, explain (and it better be a really good explanation)

Attendant & Entrant(s) will communicate by:
- [ ] Direct visual contact
- [ ] Direct verbal contact
- [ ] Radio
- [ ] Other  __________

Are MSDSs available with the attendant for all hazardous chemicals taken into the confined space?
- [x] Yes
- [ ] No  If no, entry is not allowed.

**Air Monitoring (Atmospheric testing)**
- Air monitoring of the air inside the confined space is required before entry is allowed.
- For a clean, isolated confined space the air monitoring must have been conducted within two hours of entry.
- For all other confined spaces the air monitoring must have been conducted within 15 minutes of entry.

Continuous air monitoring (entrant wears an air monitor) of a confined space must be performed whenever:
- Hazardous chemicals are being used in a confined space
- Welding, cutting, or other combustion is being conducted in the confined space
- Combustion engines are being used in the confined space or with 20 ft of an opening to the confined space
- It is possible for the atmospheric conditions may change during entry.

<table>
<thead>
<tr>
<th>Pre-Entry Air Monitoring: Date:</th>
<th>Test for:</th>
<th>Tested amount</th>
<th>Acceptable level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxygen</td>
<td>_________</td>
<td>%</td>
<td>Above 19.5% and below 22%</td>
</tr>
<tr>
<td>LEL (flammables)</td>
<td>_________</td>
<td>%</td>
<td>Below 10%</td>
</tr>
<tr>
<td>CO</td>
<td>_________</td>
<td>ppm</td>
<td>Below 35 ppm</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>_________</td>
<td>%</td>
<td>Consult MSDS</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>_________</td>
<td>%</td>
<td>Consult MSDS</td>
</tr>
</tbody>
</table>

Continue monitoring every 15 Minutes

| Oxygen                          | _________ | %             | Oxygen _________ | % |
| LEL                             | _________ | %             | LEL _________ | % |
| CO                              | _________ | %             | CO _________ | % |
| Other                           | _________ | %             | Other _________ | % |

Permit authorized by:

Date:  __________________  Time:  __________________