WORK PERMIT FOR HIGH-RISK WORKS

 To be filled out in two copies.

 During work performance, an authorized worker shall keep it.

Organization, subdivision \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WORK PERMIT No. \_\_\_\_\_

for High-Risk Works

1. Authorized worker(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (enterprise, shop, title, full name)

2. Authorized for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (place of work, name of equipment, summary of work scope and

 conditions for their performance)

3. Planned time of works:

starting at \_\_\_ hrs \_\_\_ min \_\_\_ 20\_\_

completing at \_\_\_ hrs \_\_\_ min \_\_\_ 20\_\_

4. Authorizing person(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (title, full name)

5. Hazardous production factors which exist or can

occur regardless of the work performed in the places of its performance:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Measures to ensure safety of work performance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.1. Prior to work performance

|  |  |  |  |
| --- | --- | --- | --- |
| **Item No.** | **Name of measure** | **Deadline** | **Responsible person** |
|  | To stop |  |  |  |  |
|  | (place of stop, position) |
|  | To turn off |  |  |  |  |
|  | (switch, valve, main pipe, remove a tag) |
|  | To install |  |  |  |  |
|  | (short-circuiting jumpers, dead ends, valves, warning lights) |
|  | To take sample for air analysis |  |  |  |  |
|  (please indicate the place and analysis results, gas concentration group) |
|  | To enclose |  |  |  |  |
|  | (work area, put up posters) |
|  | To provide for safety measures when workingat height and in wells \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (scaffolds, fall arrest systems, ropes) |  |  |  |
|  | To notify |  |  |  |  |
|  | (operators of neighboring and adjacent span cranes with signature in a log book) |
|  | To provide for safety measures when working nearthe railways \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (installing signs, posters, fences, dead ends) |  |  |  |
|  | To specify routes to the place of work |  |  |  |  |
|  (please attach a scheme if necessary) |
|  | Additional measures \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |

6.2. During work performance

|  |  |  |  |
| --- | --- | --- | --- |
| **Item No.** | **Name of measure** | **Deadline** | **Responsible person** |
|  | 2 | 3 | 4 |
|  |  |  |  |

7. Work Permit issued by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (title, full name, signature, date)

8. Measures taken by:

|  |  |  |  |
| --- | --- | --- | --- |
| Measure No. | Title | Last name | Signature |
| 1, 2 |  |  |  |
| 3 - 5 |  |  |  |
|  |  |  |  |

9. Agreed: shift (site) supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (last name, signature)

9.1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (title, last name, signature)

10. Measures have been taken, industrial safety conditions have been ensure,

an authorized worker has read and has been instructed about work conditions,

work permit is authorized \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (title, full name, signature, date)

11. I have read and have been instructed about work conditions, preparation has been checked,

workplace has been accepted - authorized worker \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (title, last name, signature, date, time)

12. Shift(s) consisting of \_\_\_\_\_\_\_\_\_ people has been instructed, work

has started \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (date, time)

Authorized worker \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (last name, signature)

13. Extension of work permit

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date, time | The conditions have not been changed, shift has been turned over - authorized worker | Number of workers in the next shift | I have read the work conditions and have accepted them - authorized worker | Work Permit is authorized - job authorizer in the shift |
|  | last name | signature |  | last name | signature | last name | signature |

14. The work has been completed \_\_\_\_\_\_\_\_\_\_\_, workplace has been cleaned, personnel has been removed from the site

 (date, time)

|  |  |
| --- | --- |
| Work Permit handed over by |  |
|  | (authorized worker’s title, last name, signature) |
| Work Permit accepted by |  |
|  | (authorizing person’s title, last name, signature) |

Appendix

to Work Permit No. \_\_\_\_

issued on \_\_\_\_\_\_\_\_, 20\_\_

for High-Risk Works

BRIEFING AT WORKPLACE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Item No. | Date, time, summary of briefing | Full name | Title | Signature | Authorized worker’s signature |
| 1 | 2 | 3 | 4 | 5 | 6 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |