

Dust Collectors & Cyclones -- Permit Required Confined Space Entry Permit

1. Dust Collectors ENTRY PROCEDURE AND PERMIT **All Shaded areas must be completed by Entry Supervisor or Entrant**		7. Communication method used by attendants and entrants (Check all that apply)	
2. Work to be Performed:		<input type="checkbox"/>	Radio
		<input type="checkbox"/>	Voice
3. Date Issued: / / Time Issued: : <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.		<input type="checkbox"/>	Other:
		8. Confined Space Rescue	
4. Permit Space Hazards (X = Potential Hazard or Testing Rqmt.)		9. Authorized Entrants (List by name or attach roster)	
<input checked="" type="checkbox"/>	Oxygen - hazardous when less than or equal to 19.5% OR greater than or equal to 23.5 %.		
<input checked="" type="checkbox"/>	Flammable Gases or Vapors - hazardous when greater than 10% of LFL / LEL.		
	Hydrogen Sulfide - hazardous when greater than 10 PPM		
	Carbon Monoxide - hazardous when greater than 50 PPM (always look for when welding or near a fuel combustion source (cars, utility carts ,etc)		
	Other Toxics: _____		
<input checked="" type="checkbox"/>	Mechanical Hazards (Pneumatic, Hydraulic, Electrical, Chemical, Steam, Falling Objects, Etc.)		
	Engulfment Potential		
<input checked="" type="checkbox"/>	Physical Hazards - (bees, insects, spiders, heat during summer).		
<input checked="" type="checkbox"/>	Confined Space Configuration, Layout or Arrangement		
5. Additional Permits or Forms (Please attach if required)			
Hot Work Permit: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A			
LOTO / Hazardous Energy Control Procedure: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A			
Other:			
6. Equipment Required for Entry & Work (Check box when complete)			
<input type="checkbox"/>	PPE	Eye Protection, Body Harness, other PPE for heat if necessary (gloves, long sleeves, etc)	
<input type="checkbox"/>	Atmospheric Testing	4 Gas Meter required for testing, test atmosphere in the dust collector by using stratified method of checking atmosphere at different levels within the space.	
<input type="checkbox"/>	Respiratory Protection	1/2 face respirator with HEPA filters is required for entry into the dust collector. Contact EH&S.	
<input type="checkbox"/>	Ventilation Equipment	Full ventilation is required before and during entry unless the space is proven to be free of atmospheric hazards or no atmospheric changes will occur due to work operations within the dust collector.	
<input type="checkbox"/>	Rescue Equipment	Entrant will be rescued from horizontal entry by use of a lifeline that is directly connected to the full body harness. The attendant is ready to assist the entrant in an emergency	
11. Preparation for Entry (Check boxes when complete)			
<input type="checkbox"/>	Notify the affected departments of service interruption.		
<input type="checkbox"/>	Inspect all required equipment, tools and PPE prior to entry. Barricade the area to prevent unauthorized entry or access. Setup necessary equipment for entry operations		
<input type="checkbox"/>	Ensure that all Hazardous Energy is isolated per the specific Hazardous Energy Control Procedure.		
<input type="checkbox"/>	Sign in Authorized Entrants in Step 9 and Sign in Attendants in Step 10.		
<input type="checkbox"/>	Take a preliminary atmospheric reading with approved 4 gas meter and record reading on Step 12. Atmosphere should be continuously tested during entry. Periodically record sample readings in Step 12.		
<input type="checkbox"/>	Upon eliminating or controlling all hazards and the Entry Supervisor signing Step 13, proceed to make entry.		

12. Atmosphere Testing Record Acceptable Conditions	Time:	Time:	Time:	Time:	Time:	Time:
	Entry #1 Results	Entry #2 Results	Entry #3 Results	Entry #4 Results	Entry #5 Results	Entry #6 Results
CH4 - Less than 10% of LEL / LFL						
OXY - Oxygen Range - Minimum allowable = 19.6% to Maximum allowable = 23.4%						
H2S - Hydrogen Sulfide - < than 10 PPM						
CO - Carbon Monoxide - < than 35 PPM						
Other Toxic:						
Tester Initials						

13. Authorization by Entry Supervisors

I certify that all required precautions have been taken and necessary equipment is provided for safe entry and work in this dust collector confined space.

Printed Name	Signature	Date	Time	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
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14. Permit Cancellation (Complete at the end of job not to exceed 24 hours)

	Date	Time	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
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This permit must be posted at the job site -- One Copy to Dept File and One Copy to EH&S Office (Fax 7-5302 or EHS Building)