

P04 - HOT WORK PERMIT

This permit is to be used for all heat, flame and spark producing tasks.

		Tills per	illit is to be use	su ioi ali	neat, name an	u spark	producing	tasks.		
Ref:			Issue:				Permit no			
Contractor:			Supervisor:				Operative	s involved:		
									T	
Permit issued Work site:	d to:					Date:				
	lone:						Time of inspection:			
Work to be done: (brief description)						Time of issue:				
Start date and time							on of permit not exceed		8Hrs Including 2Hrs Watch	<u>Fire</u>
			C	ONTR	OL MEASUF	RES				
Extinguisher location:		Must be adjac	Must be adjacent to the works				Inspection date:			
			EXTINGL	JISHER	TYPE: (AS AF	PLICA	BLE)			
Water			C02		Dry powder		er		Foam	
	[]		[]			[]			[]	
			SM	OKE/H	EAT DETECTO	OR(S)				
In	vicinity of wo	orking area	ing area Detec			ctors disabled			Flammable dust, vapours	
[]]			[]			[]		
Nearest telephone:		Operatives Mob	Operatives Mobile -		Emergency number:		Secur	Security: 01608 678380		
			PRF	CALITIC	NS TO BE	ΓΔΚΕΝ				
PRECAUTIONS TO BE CONFIRMATION TICK						. / (I _ I \			NAME	
pla	e end of shift atch can take ace.	so ?								
For works w Roof Sheeting watched cont hour, then pe	g, area must tinually for o	be one								
materials bef the ho Check both si walls in case	combustible fore and durir ot works.	on								
	hting equipm and persons eir correct use									
Ensure opera of emergency how to rais	tive knowled plans includi se the alarm.	ge ing								
Block gaps or spread of fla	voids to prev ame or spark	ent .								
blankets to p spread of sp	of screens or protect agains parks and hor ticles.									

V 23.0 Date Reviewed : 22.02.2024



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upright and flashback arrestors fitted.			N/A							
Remove all flammable liquid containers or gas cylinders from work area.			N/A							
	cylinders etc. Must not left in the building overnight.		N/A							
Spent welding rods must be immersed in a bucket of water.			N/A							
ISSUE OF PERMIT										
1350L OF FEINWIT										
Confirmation by contractor's supervisor: I confirm that the precautions specified above will be complied With and I will ensure that the persons carrying out this work are fully briefed on the safe method of work.										
	Signed		Print	Date						
CONFI	CONFIRMATION BY OPERATOR: I UNDERSTAND THE PRECAUTIONS TO BE TAKEN IN CARRYING OUT THE HOT WORKS.									
	Signed		Print	Date						
EPS SITE MANAGEMENT AUTHORISATION: I CERTIFY THAT THE ABOVE WORK CAN COMMENCE WITH THE PRECAUTIONS DETAILED ABOVE.										
	Signed		Print	Date						
SUPPLIER : I CERTIFY THAT THE WORK HAS BEEN COMPLETED, THE POST-WORKS FIREWATCH CARRIED OUT AND ALL PERSONNEL & EQUIPMENT HAS BEEN WITHDRAWN FROM THE AREA										
Date:		Time:	Print nan	ne:						
20.0.		1	Signature	e:						

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