

### Permit To Work Report - Electrical Work (Permit UID - APA/PTW/PTWNOT/EL/0003)

Type of permit	Electrical Work																
Name of project/ site	PTW Notification																
Contractor company	PTW Notification Test																
Name of client/ contractor	Gautham Lucky																
Work location	t10																
Scope of work	scope																
Work permit start date	10/19/2024 12:00:00 AM																
Work permit start time	10/19/2024 11:23:00 AM																
Work permit close date	10/19/2024 12:00:00 AM																
Work permit close time	10/19/2024 10:00:00 PM																
No. of workers	10																
Tools/ equipments to be used	tools																
Description of work																	
Reference permit no.																	
Hazards	<table> <tr> <td>Electrical Shock <input checked="" type="checkbox"/></td><td>Arcing <input checked="" type="checkbox"/></td><td>Arc Flash <input checked="" type="checkbox"/></td><td>Fire <input checked="" type="checkbox"/></td></tr> <tr> <td>Explosion <input checked="" type="checkbox"/></td><td>Person Fall <input checked="" type="checkbox"/></td><td>Equipment Fall <input checked="" type="checkbox"/></td><td>Other Hazards :</td></tr> </table>	Electrical Shock <input checked="" type="checkbox"/>	Arcing <input checked="" type="checkbox"/>	Arc Flash <input checked="" type="checkbox"/>	Fire <input checked="" type="checkbox"/>	Explosion <input checked="" type="checkbox"/>	Person Fall <input checked="" type="checkbox"/>	Equipment Fall <input checked="" type="checkbox"/>	Other Hazards :								
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Attachments	<a href="#">Image - 1</a>	<a href="#">Image - 2</a>	<a href="#">File - 1</a>														
Toolbox talks	{ToolboxTalks}																

PPEs	Safety Shoes <input checked="" type="checkbox"/>		Full Body Harness <input checked="" type="checkbox"/>		Cover All <input checked="" type="checkbox"/>	
	Insulated Face Shield <input checked="" type="checkbox"/>		Insulated Hand Gloves <input checked="" type="checkbox"/>		Insulated Boots <input checked="" type="checkbox"/>	
	UV Protection Shield <input checked="" type="checkbox"/>		Other PPEs : na			
	Attachments	<a href="#">Image - 1</a>	<a href="#">Image - 2</a>	<a href="#">File - 1</a>	<a href="#">File - 2</a>	

Safety considerations	Has the Electricity Supply been turned off?		No	
	Have the relevant departments been advised of the electrical isolation?		No	
	Has the Fire Sprinkler System been left in service?		No	
	Flammable / Combustible substances been removed from the area?		No	
	Are Fire Extinguishers required?		No	
	Is a Fire Blanket Required?		No	
	Is a Voltage Detection Instrument required?		No	
	Is Earthing/grounding Required & Provided?		Yes	
	Are Circuit Breakers required?		Yes	
	Are Caution / Danger Signs required?		Yes	
	Is Electrical Safety Matting required?		No	
	Are Electrical Insulating Gloves required?		No	
	Have the Electrical Insulating Gloves been Air Tested prior to use?		No	
	Has Lock Out Tag Out been undertaken?		No	
	Is Arc Flash PPE Required(Boots /Overalls/Gloves/Goggles/ Safety Visor)?		Yes	
	Is a Standby Person present - during Live Electrical Test Work?		Yes	
	HIRA of electrical work to be undertaken.		Yes	
	Is Rescue is available..?		Yes	
Attachments	<a href="#">Image - 1</a>	<a href="#">Image - 2</a>	<a href="#">File - 1</a>	<a href="#">File - 2</a>

#### Approval and authorization

Requestor/holder	Approver	Reviewer
<b>Name:</b> Gautham Lucky <b>Phone:</b> +918919110596 <b>Requested On:</b> 19-Oct-2024 11:27:32 AM	<b>Name:</b> Kona Sai Prashanth <b>Phone:</b> +917993748762 <b>Approved On:</b> 19-Oct-2024 04:09:22 PM	<b>Name:</b> NA <b>Phone:</b> NA <b>Reviewed On:</b> NA