



Doc No: MHCPL-EHS-PTW-14

**Permit To Work Report - Electrical Work (Permit UID - APA/MAL/ABCCON/EL/0002)**

**Permit Information**

Type of permit	Name of project/site	Contractor company	Name of client/contractor
Electrical Work	Malkajgiri	Abc Constructions	Raj Kumar Pativada

**Work Information**

Start date / Close Date	1/9/2025 12:00:00 AM / 1/9/2025 12:00:00 AM	Work location	Testing Lat & long
Start time / End time	1/9/2025 3:22:00 PM / 1/9/2025 6:00:00 PM	Reference permit no.	
No. of workers	0	Tools/ equipment to be used	
Scope of work	Testing Lat & long		
Description of work			

**Sections**

**Hazards**

Electrical Shock <input type="checkbox"/>	Arcing <input type="checkbox"/>	Arc Flash <input type="checkbox"/>	Fire <input type="checkbox"/>
Explosion <input type="checkbox"/>	Person Fall <input type="checkbox"/>	Equipment Fall <input type="checkbox"/>	Other Hazards:

**Precautions Taken**

ISOLATION <input type="checkbox"/>	LOTO Applied <input type="checkbox"/>	Isolation Switch available <input type="checkbox"/>	Discharge Rods Available <input type="checkbox"/>
HIRA Undertaken <input type="checkbox"/>	Signage's Provided <input type="checkbox"/>	SOP <input type="checkbox"/>	Earth Pits Provided <input type="checkbox"/>
ELCB / RCCB Provided <input type="checkbox"/>	Rubber Mats Provided <input type="checkbox"/>	Awareness on expected emergencies ? <input type="checkbox"/>	Other Precautions:

**Toolbox Talks**

Topics discussed:	Attach photo: 0
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**Job Specific PPEs**

Safety Shoes <input type="checkbox"/>	Full Body Harness <input type="checkbox"/>	Cover All <input type="checkbox"/>	Insulated Face Shield <input type="checkbox"/>
Insulated Hand Gloves <input type="checkbox"/>	Insulated Boots <input type="checkbox"/>	UV Protection Shield <input type="checkbox"/>	Other PPEs:

**Safety Considerations**

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

**Approval and authorization**

Requestor	Issuer	Approver	Reviewer
<b>Name:</b> Raj Kumar Pativada <b>Phone:</b> +919160948627 <b>Requested On:</b> 09-Jan-2025 03:30:49 PM	<b>Name:</b> NA <b>Phone:</b> NA <b>Issued On:</b> NA	<b>Name:</b> NA <b>Phone:</b> NA <b>Approved On:</b> NA	<b>Name:</b> NA <b>Phone:</b> NA <b>Reviewed On:</b> NA

Permit To Work History

NA

Created On	Created By	Comment	Attachments
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