



Doc No: MHCPL-EHS-PTW-13

Permit To Work Report - Blasting Work (Permit UID - APA/OSS/ABCCON/BL/0009)

Permit Information

Type of permit	Name of project/site	Contractor company	Name of client/contractor
Blasting Work	Osmosys Software Solution	Abc Constructions	Kohli OSM

Work Information

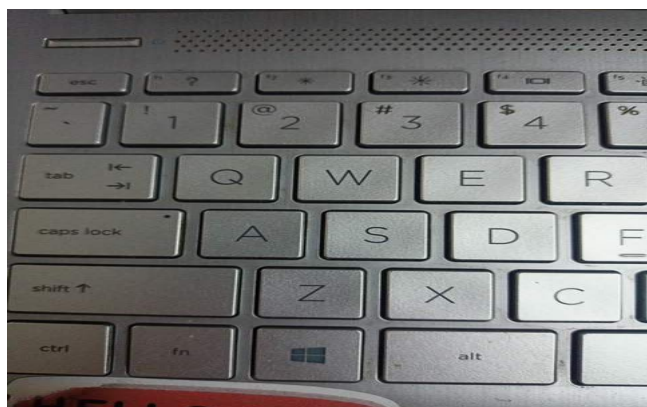
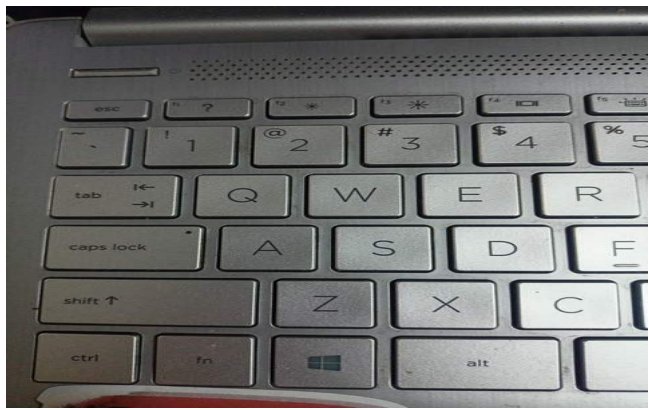
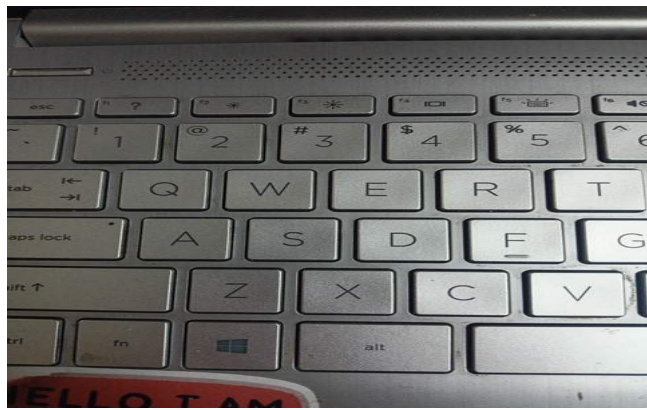
Start date / Close Date	12/21/2024 12:00:00 AM / 12/21/2024 12:00:00 AM	Work location	
Start time / End time	12/21/2024 1:46:00 PM / 12/21/2024 6:00:00 PM	Reference permit no.	
No. of workers	NA	Tools/ equipment to be used	
Scope of work			
Description of work			

Sections

Hazards

Fly Rock <input checked="" type="checkbox"/>	Dust <input checked="" type="checkbox"/>	Fumes <input checked="" type="checkbox"/>	Toxic Gases <input checked="" type="checkbox"/>
Miss-Fires <input checked="" type="checkbox"/>	Explosion <input checked="" type="checkbox"/>	Fire <input checked="" type="checkbox"/>	Vibration <input checked="" type="checkbox"/>
Noise <input checked="" type="checkbox"/>	Other Hazards:		

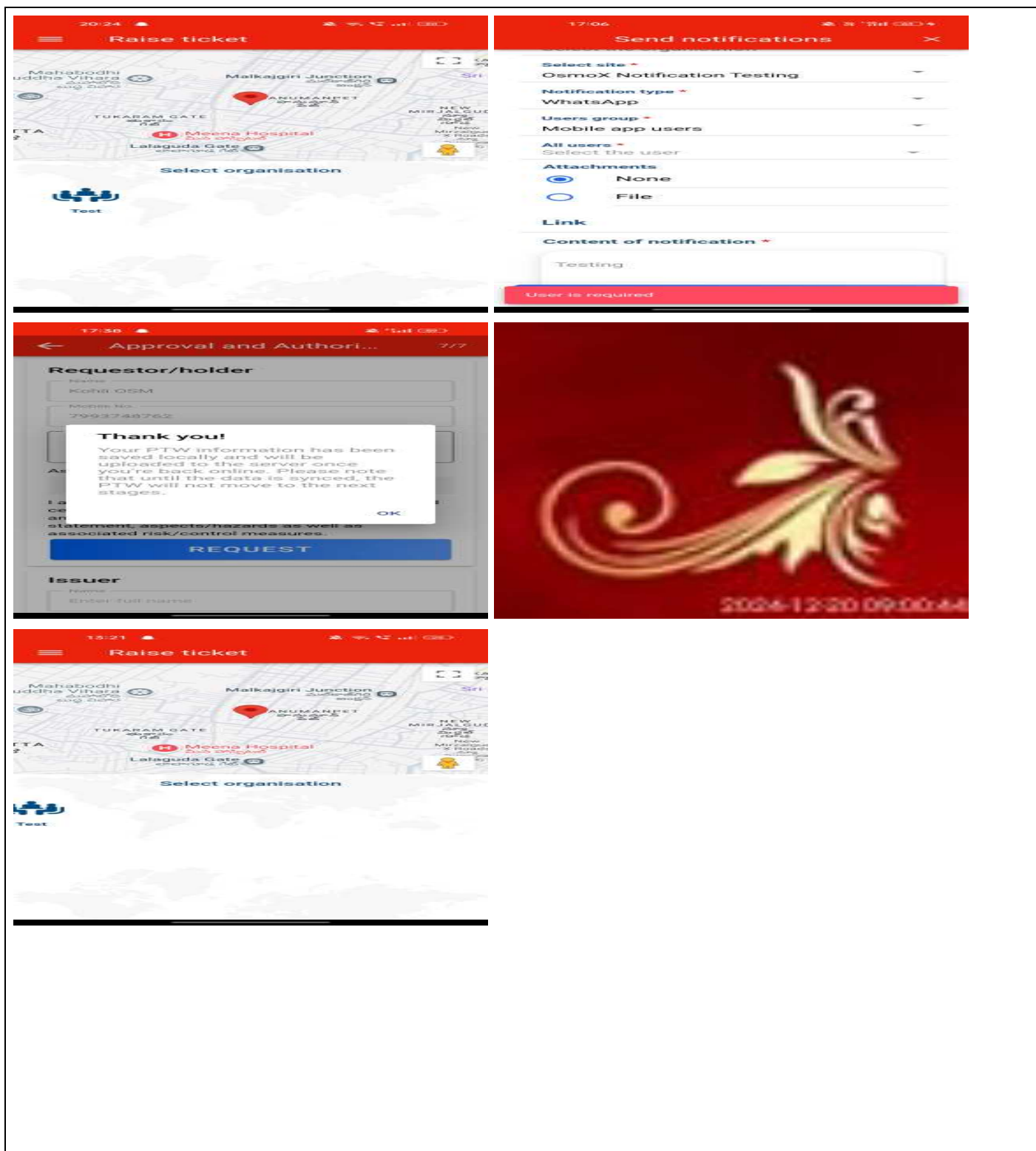
Attachments



Precautions Taken

Licensed Blaster <input checked="" type="checkbox"/>	Blasting NOC <input checked="" type="checkbox"/>	Blasting Siren <input checked="" type="checkbox"/>	HIRA Undertaken <input checked="" type="checkbox"/>
Signage's Provided <input checked="" type="checkbox"/>	Blasting SOP <input checked="" type="checkbox"/>	Controlled Blasting <input checked="" type="checkbox"/>	Separate Containers for Explosive & ED's <input checked="" type="checkbox"/>
Awareness on expected emergencies ? <input checked="" type="checkbox"/>	Other Precautions:		

Attachments



Toolbox Talks

Topics discussed:	Attach photo: 0
-------------------	-----------------

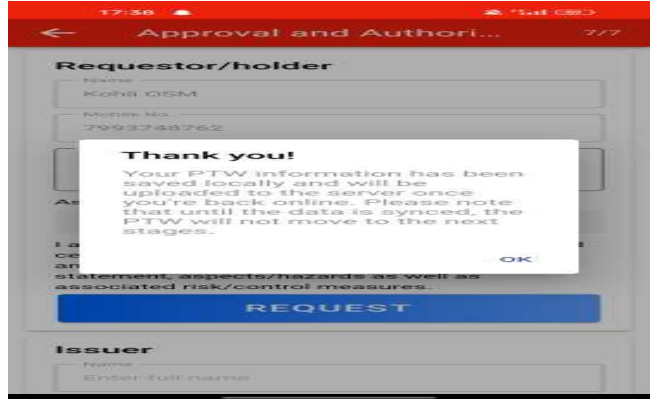
Attachments



Job Specific PPEs

Safety Shoes <input type="checkbox"/>	Ear Plugs / Muffs <input type="checkbox"/>	Reflective Vest <input type="checkbox"/>	Hand Gloves <input type="checkbox"/>
Nose Mask <input type="checkbox"/>	Goggles <input type="checkbox"/>	Other PPEs:	

Attachments



Safety Considerations

The blaster must possess a valid license.: No	Explosive to be transported in road, in an Explosive van.: No	Explosive should not be carried in the same vehicle with detonators.: No	Vehicle should be equipped with a non-sparking metal or wooden floor.: No
Do not use damaged/deteriorated explosives and accessories.: No	No holes should be loaded except those that are to be fired in the next round of blasting. Holes loaded during one shift should be fired on the same shift.: No	Post guards with red flags at a safe distance around the site to prevent persons approaching the danger area inadvertently while the shots are being fired.: No	Ensure to handle miss-fires by authorised blaster.: No
Carryout blasting is in day light hours only.: No	All Blasting's should be controlled/muffed blasting's.: No		

Approval and authorization

Requestor	Issuer	Approver	Reviewer
Name: Kohli OSM Phone: +917993748762 Requested On: 21-Dec-2024 01:49:00 PM	Name: NA Phone: NA Issued On: NA	Name: NA Phone: NA Approved On: NA	Name: NA Phone: NA Reviewed On: NA

Permit To Work History

Created On	Created By	Comment	Attachments
21-Dec-2024 01:49:00 PM	Kohli OSM	The status has changed to Requested. Assigned Issuer: Om Issuer	