

Doc No: MHCPL-EHS-PTW-14

Permit To Work Report - Electrical Work (Permit UID - APA/PTI/LIKEGH/EL/0001)

Type of permit	Electrical Work														
Name of project/ site	PTW-I														
Contractor company	Abc Constructions														
Name of client/ contractor	Vaibhav Requestor														
Work location															
Scope of work															
Work permit start date	11/8/2024 12:00:00 AM														
Work permit start time	11/8/2024 9:01:00 PM														
Work permit close date	11/15/2024 12:00:00 AM														
Work permit close time	11/8/2024 11:30:00 PM														
No. of workers	0														
Tools/ equipments to be used															
Description of work															
Reference permit no.															
Location	NA														
Hazards	<table border="1"> <tr> <td>Electrical Shock <input type="checkbox"/></td><td>Arcing <input checked="" type="checkbox"/></td><td>Arc Flash <input type="checkbox"/></td><td>Fire <input type="checkbox"/></td></tr> <tr> <td>Explosion <input checked="" type="checkbox"/></td><td>Person Fall <input type="checkbox"/></td><td>Equipment Fall <input type="checkbox"/></td><td>Other Hazards :</td></tr> </table>			Electrical Shock <input type="checkbox"/>	Arcing <input checked="" type="checkbox"/>	Arc Flash <input type="checkbox"/>	Fire <input type="checkbox"/>	Explosion <input checked="" type="checkbox"/>	Person Fall <input type="checkbox"/>	Equipment Fall <input type="checkbox"/>	Other Hazards :				
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Toolbox talks	{ToolboxTalks}														

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?		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?		No
	Are Circuit Breakers required?		No
	Are Caution / Danger Signs required?		No
	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)?		No
	Is a Standby Person present - during Live Electrical Test Work?		No
	HIRA of electrical work to be undertaken.		No
	Is Rescue is available..?		No

Approval and authorization

Requestor/holder	Issuer	Reviewer
Name: Vaibhav Requestor Phone: +918860593356 Requested On: 08-Nov-2024 03:30:32 PM	Name: Abhinav Reviewer Phone: +917273883504 Issued On: 08-Nov-2024 03:31:16 PM	Name: NA Phone: NA Reviewed On: NA