



Doc No: MHCPL-EHS-PTW-16

**Permit To Work Report - De-shuttering Work (Permit UID - APR/LAL/QWERTY/DW/0001)**

**Permit Information**

Type of permit	Name of project/site	Contractor company	Name of client/contractor
De-shuttering Work	Lalit's Test Site 001	Aparna Constructions	RajKumar Pativada -OSM

**Work Information**

Start date / Close Date	28-May-2025 / 28-May-2025
Start time / End time	10:51:00 AM / 06:00:00 PM

**Sections**

**JobDetails**

Work Location: NA	Number Of Workers: NA	Tools/equipment: NA	Scope of Work: NA
Description Of Work: NA	Reference Permit Number: NA		

**Hazards**

Falling Materials <input type="checkbox"/>	Fall of Person <input type="checkbox"/>	Unsafe Working Platform <input type="checkbox"/>	Improper Handling of Materials <input type="checkbox"/>
Scaffold Collapse <input type="checkbox"/>	Slip, Trip & Fall <input type="checkbox"/>	Poor Housekeeping <input type="checkbox"/>	Other Hazards: NA

**Precautions Taken**

Area Barricading <input type="checkbox"/>	Safe working platform <input type="checkbox"/>	Adequate illumination <input type="checkbox"/>	HIRA Undertaken <input type="checkbox"/>
Good Housekeeping <input type="checkbox"/>	Provide Safety Nets <input type="checkbox"/>	Proper Supervision <input type="checkbox"/>	Safe Access / Egress <input type="checkbox"/>
Awareness on expected emergencies ? <input type="checkbox"/>	Other Precautions: NA		

**Toolbox Talks**

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

**Job Specific PPEs**

Safety Helmet <input type="checkbox"/>	Safety Shoes <input type="checkbox"/>	Full Body Harness <input type="checkbox"/>	Cover All <input type="checkbox"/>
Cotton Hand Gloves <input type="checkbox"/>	Gum Boots <input type="checkbox"/>	Goggles <input type="checkbox"/>	Face Shield <input type="checkbox"/>
Other PPEs: NA			

**Safety Considerations**

Workers must be provided with safe access to the work.: <b>No</b>	Acrophobia test of worker. (Height Phobia etc.): <b>No</b>	De-shuttering materials should be kept away properly in working areas.: <b>No</b>	Do not overload the working platform with materials.: <b>No</b>
Ensure adequate supervision and experienced carpenters for safe works.: <b>No</b>	Ensure proper scaffolding working platform is used.: <b>No</b>	The de-Shuttering area should be barricaded before starting work.: <b>No</b>	Inspection of working scaffolds, ladders, ramps and crossings.: <b>No</b>
Maintenance of good housekeeping around the working area and Access.: <b>No</b>	Avoid throwing shuttering materials from a height.: <b>No</b>	Using a Pulley & rope system to lower the de-shuttering materials.: <b>No</b>	Guarding of peripheral edges and floor openings.: <b>No</b>
Safety training of workmen involved in formwork?: <b>No</b>	Removal of all unused and hanging forms, loose materials, etc.: <b>No</b>	De-shuttering columns after the development of adequate strength in concrete.: <b>No</b>	Construction loads not placed on the freshly cast slab while removal of formwork.: <b>No</b>

**Approval and authorization**

Requestor_Trial-1	Issuer_Trial-2	Approver_Trial-3	Reviewer_Trial-4
<b>Name:</b> RajKumar Pativada - OSM <b>Phone:</b> +919160948627 <b>Time:</b> 28-May-2025 10:51:54 AM	<b>Name:</b> NA <b>Phone:</b> NA <b>Time:</b> NA	<b>Name:</b> NA <b>Phone:</b> NA <b>Time:</b> NA	<b>Name:</b> NA <b>Phone:</b> NA <b>Time:</b> NA

**Permit To Work Closure**

Check 1 <input type="checkbox"/>	Check 2: NA	Check 4: <b>No</b>	Check 6 <input type="checkbox"/>
Check 7: 0			
Check 3: NA	Check 5: NA		

**Permit To Work History**

Created On	Created By	Comment	Attachments
28-May-2025 06:01:04 PM	System User	The status has changed to Closed -6 automatically.	
28-May-2025 10:51:54 AM	RajKumar Pativada - OSM	The status has changed to Requested -3. Assigned Issuer_Trial-2: RajKumar Pativada	