

Permit To Work Report - Concrete Work (Permit UID - MHC/GRA/BSR/CW/0116)

Permit Information

Type of permit	Name of project/site	Contractor company	Name of client/contractor
Concrete Work	Grava	BSR Infra Ventures Private Ltd	Lalit Requestor

Work Information

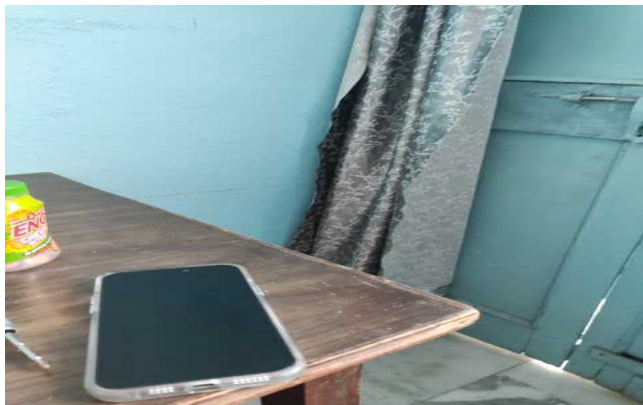
Start date / Close Date	03-Apr-2025 / 07-Apr-2025	Work location	tower 1
Start time / End time	01:50:00 PM / 01:55:00 PM	Reference permit no.	112
No. of workers	10	Tools/ equipment to be used	safety tools
Scope of work	safety scope		
Description of work	safety description		

Sections

Hazards

Contact with Eyes <input type="checkbox"/>	Skin Contact <input type="checkbox"/>	Inhalation <input checked="" type="checkbox"/>	Electrical Shock <input checked="" type="checkbox"/>
Hit by Vehicle <input checked="" type="checkbox"/>	Scaffold Collapse <input checked="" type="checkbox"/>	Slip, Trip & Fall <input checked="" type="checkbox"/>	Hit by Boom <input checked="" type="checkbox"/>

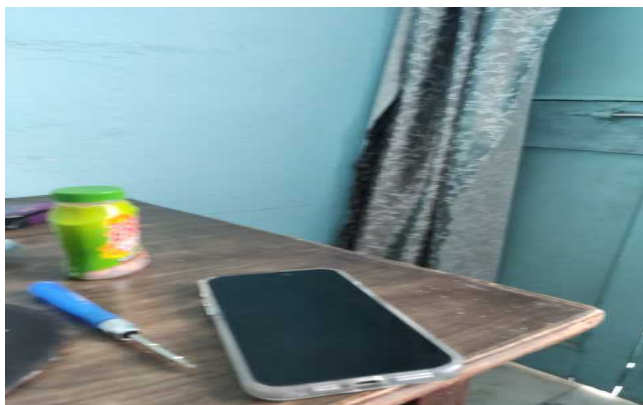
Attachments



Precautions Taken

Good Access / Egress <input checked="" type="checkbox"/>	Scaffolding & working Platform <input type="checkbox"/>	Adequate illumination <input checked="" type="checkbox"/>	HIRA Undertaken <input type="checkbox"/>
Good Housekeeping <input checked="" type="checkbox"/>	Ladder Provided <input type="checkbox"/>	Mobile Scaffolding <input checked="" type="checkbox"/>	Awareness on expected emergencies ? <input type="checkbox"/>

Attachments



Toolbox Talks

Topics discussed: safety	Attach photo: 1
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Attachments



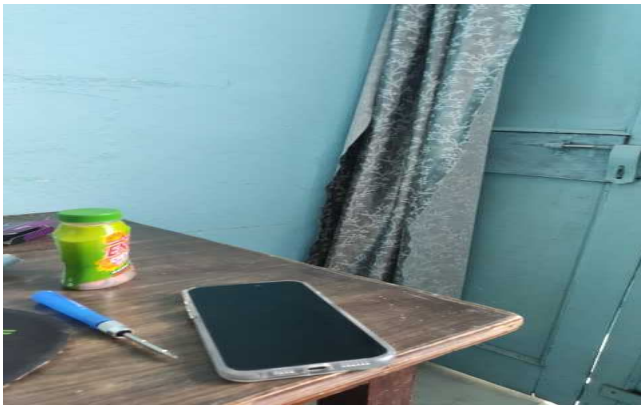
Job Specific PPEs

Safety Helmet <input checked="" type="checkbox"/>	Safety Shoes <input checked="" type="checkbox"/>	Full Body Harness <input checked="" type="checkbox"/>	Cover All <input type="checkbox"/>
Rubber Hand Gloves <input checked="" type="checkbox"/>	Gum Boots <input type="checkbox"/>	Goggles <input type="checkbox"/>	Face Shield <input type="checkbox"/>

Safety Considerations

Required fall protection systems in place.: No	Workers using required fall protection systems.: No	Hoisting and rigging operations performed in a safe manner.: No	Guardrails in place and secure.: No
Rebar ends capped to prevent impaling.: NA	Wearing safety glasses or goggles when pouring concrete?: NA	Concrete washout water, collection, containment, disposal.: No	All workers have received basic Hazard Communication training?: No
MSDSs are available on the site for cement and related products used?: No	ELCB/RCCB provided for Needle Vibrators?: No	Proper Edge protection provided in concrete area?: No	All vibrators/lights electrical cables laid above 7' (feet) height?: No
Proper Access/egress provided in concrete pour area?: No	Is Proper Bracing provide for slab supporting props/Posts?: No	Is Eye Wash area provided near to concrete pouring area?: No	Verification of Pumping equipment's are inspected prior to start?: No

Attachments



Approval and authorization

Requester	Issuer	Approver	Reviewer
Name: Lalit Requestor Phone: +919999999990 Time: 03-Apr-2025 01:52:10 PM	Name: Lalit -ISSUER Phone: +919999999900 Time: 03-Apr-2025 01:54:13 PM	Name: Lalit -Approver Phone: +919988778899 Time: 03-Apr-2025 01:55:05 PM	Name: Lalit -Reviewer Phone: +911122112211 Time: 03-Apr-2025 01:56:04 PM

Permit To Work History

Created On	Created By	Comment	Attachments
04-Apr-2025 05:34:05 PM	System User	The status has changed to Temporarily Suspended automatically.	

04-Apr-2025 05:32:45 PM	Lalit Requestor	Section: Hazards Inhalation - Checked Electrical Shock - Checked Scaffold Collapse - Checked Hit by Boom - Checked Section: Precautions Taken Good Access / Egress - Checked Good Housekeeping - Checked Section: Job Specific PPEs Safety Helmet - Checked Safety Shoes - Checked Section: Safety Considerations Rebar ends capped to prevent impaling. - NA Wearing safety glasses or goggles when pouring concrete? - NA	
04-Apr-2025 05:32:45 PM	Lalit Requestor	Status changed to Validation Requested. Following changes are made: Section: Hazards Inhalation - Checked Electrical Shock - Checked Scaffold Collapse - Checked Hit by Boom - Checked Section: Precautions Taken Good Access / Egress - Checked Good Housekeeping - Checked Section: Job Specific PPEs Safety Helmet - Checked Safety Shoes - Checked Section: Safety Considerations Rebar ends capped to prevent impaling. - NA Wearing safety glasses or goggles when pouring concrete? - NA Assigned Issuer: Lalit -iSSUER	
03-Apr-2025 02:40:05 PM	System User	The status has changed to Temporarily Suspended automatically.	
03-Apr-2025 02:40:03 PM	Lalit Requestor	Status changed to Validation Requested. No changes were made. Assigned Issuer: Lalit -iSSUER	
03-Apr-2025 01:58:05 PM	System User	The status has changed to Temporarily Suspended automatically.	
03-Apr-2025 01:56:04 PM	Lalit -Reviewer	The status has changed to Reviewed.	
03-Apr-2025 01:55:05 PM	Lalit -Approver	The status has changed to Approved. Assigned Reviewer: Lalit -Reviewer	
03-Apr-2025 01:55:05 PM	System User	The status has changed to Temporarily Suspended automatically.	
03-Apr-2025 01:54:13 PM	Lalit -iSSUER	The status has changed to Issued. Assigned Approver: Lalit -Approver	
03-Apr-2025 01:52:10 PM	Lalit Requestor	The status has changed to Requested. Assigned Issuer: Lalit -iSSUER	