

Permit To Work Report - De-shuttering Work (Permit UID - OWZXFE)

Type of permit	De-shuttering Work																		
Name of project/ site	Apas																		
Contractor company	BBA Constructions Pvt Ltd.																		
Name of client/ contractor	Rajkumar Pativada																		
Work location	Metro																		
Scope of work	Sample scope of work																		
Work permit start date	4/19/2024 12:00:00 AM																		
Work permit start time	9/17/2024 2:30:00 PM																		
Work permit close date	4/19/2024 12:00:00 AM																		
Work permit close time	9/17/2024 11:30:00 PM																		
No. of workers	100																		
Tools/ equipments to be used	Sample tools																		
Description of work	Sample description of work																		
Reference permit no.	AX-123																		
Hazards	<table><tr><td>Falling Material</td><td><input checked="" type="checkbox"/></td></tr><tr><td>Fall of Person</td><td><input checked="" type="checkbox"/></td></tr><tr><td>Unsafe Working Platform</td><td><input checked="" type="checkbox"/></td></tr><tr><td>Improper Handling of Material</td><td><input type="checkbox"/></td></tr><tr><td>Scaffold Collapse</td><td><input type="checkbox"/></td></tr><tr><td>Slip, Trip &amp; Fall</td><td><input type="checkbox"/></td></tr><tr><td>Poor Housekeeping</td><td><input checked="" type="checkbox"/></td></tr><tr><td>Other Hazards</td><td>Sample other hazards</td></tr></table>			Falling Material	<input checked="" type="checkbox"/>	Fall of Person	<input checked="" type="checkbox"/>	Unsafe Working Platform	<input checked="" type="checkbox"/>	Improper Handling of Material	<input type="checkbox"/>	Scaffold Collapse	<input type="checkbox"/>	Slip, Trip & Fall	<input type="checkbox"/>	Poor Housekeeping	<input checked="" type="checkbox"/>	Other Hazards	Sample other hazards
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	Slip, Trip & Fall	<input type="checkbox"/>																	
	Poor Housekeeping	<input checked="" type="checkbox"/>																	
Other Hazards	Sample other hazards																		

Precautions taken	Area Barricading	<input checked="" type="checkbox"/>
	Safe working platform	<input checked="" type="checkbox"/>
	Adequate illumination	<input checked="" type="checkbox"/>
	HIRA Undertaken	<input type="checkbox"/>
	Good Housekeeping	<input type="checkbox"/>
	Provide Safety Nets	<input type="checkbox"/>
	Toolbox Talks	<input checked="" type="checkbox"/>
	Proper Supervision	<input checked="" type="checkbox"/>
	Safe Access / Egress	<input checked="" type="checkbox"/>
	Awareness on expected emergencies ?	<input checked="" type="checkbox"/>
	Other Precautions	Sample other precautions
Toolbox talks	NA	
PPEs	Safety Helmet	<input checked="" type="checkbox"/>
	Safety Shoes	<input checked="" type="checkbox"/>
	Full Body Harness	<input checked="" type="checkbox"/>
	Cover All	<input checked="" type="checkbox"/>
	Cotton Hand Gloves	<input type="checkbox"/>
	Gum Boots	<input type="checkbox"/>
	Goggles	<input type="checkbox"/>
	Face Shield	<input checked="" type="checkbox"/>
	Other PPEs	Sample other PPEs

Safety considerations	Workers must be provided with safe access to the work	NA
	Acrophobia test of worker (Height Phobia etc.)	NA
	De-shuttering materials should be kept away properly in working areas	NA
	Do not overload the working platform with materials.	NA
	Ensure adequate supervision and experienced carpenters for safe works	NA
	Ensure proper scaffolding working platform is used	NA
	The de-Shuttering area should be barricaded before starting work	NA
	Inspection of working scaffolds, ladders, ramps and crossings	NA
	Maintenance of good housekeeping around the working area and Access	NA
	Avoid throwing shuttering materials from a height	NA
	Using a Pulley & rope system to lower the de-shuttering materials	NA
	Guarding of peripheral edges and floor openings	NA
	Safety training of workmen involved in formwork	NA
	Removal of all unused and hanging forms, loose materials, etc.	NA
	De-shuttering columns after the development of adequate strength in concrete	NA
	Construction loads not placed on the freshly cast slab while removal of formwork	NA

#### Approval and authorization

Contractor/ client (Requestor/holder)	Contractor safety officer (Issuer)	Client work/tower in- charge (Approver)	Client safety (Reviewer)
<b>Name:</b> Rajkumar Pativada <b>Phone:</b> +919160948627 <b>Requested On:</b> 19-Apr-2024 01:18:12 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> Sayan Mondal <b>Phone:</b> +918087552021 <b>Reviewed On:</b> 22-Apr-2024 10:17:13 PM

**Requestor:** I accept the conditions stated on the permit & certify that all persons under my control will be made fully aware of the method statement, aspects/hazards as well as associated risks/control measures.

**Issuer:** I hereby certify that the Checks/ precautionary measures as mentioned in the previous sections are confirmed. The permit requester has been informed of all the conditions stated in the SOP, aspects/hazards as well as associated risks/ control measures.

**Approver:** I hereby certify that all the control measures have been verified and found complied, on job trainings have provided as required.

**Reviewer:** I hereby certify that all the control measures have been verified and found complied, on job trainings have provided as required.

