

Work Permit Report - (Work Permit UID - WP/TTK/COI/HOK/25/00007)

Work Permit Information

Work Permit UID	WP/TTK/COI/HOK/25/00007	Category Name	Hot Work
Description		Status	NA
Site Name	Coimbatore	Department Name	Stores
Location	NA	Initiated By	Raj Kumar Pativada
Start Date & Time	12-Sep-2025 05:59:00 PM	End Date & Time	12-Sep-2025 11:30:00 PM
Created On	12-Sep-2025 06:00:36 PM	Due Date	12-Sep-2025 12:00:00 AM
Contractor	NA	Shift	NA

Sections

1. Hazards Identified

Presence of Toxic Gas Fumes <input type="checkbox"/>	Sharp Edges <input type="checkbox"/>	Poor Lighting <input type="checkbox"/>	Combustible Materials Nearby <input type="checkbox"/>
Work near Over Head Electrical Line <input type="checkbox"/>	Presence of Flammable Gas <input type="checkbox"/>	Tripp Hazard <input type="checkbox"/>	Static Electricity <input type="checkbox"/>
Flammable Materials Nearby <input type="checkbox"/>	Improper Access <input type="checkbox"/>	Unguarded Opening <input type="checkbox"/>	Slip Hazard <input type="checkbox"/>
Steam <input type="checkbox"/>	Oil Spillage Observed <input type="checkbox"/>	Moving / Running Machinery <input type="checkbox"/>	Confined Space <input type="checkbox"/>
Excavation Collapse <input type="checkbox"/>	Vibration <input type="checkbox"/>	Height Work <input type="checkbox"/>	Work on Fragile Roofs <input type="checkbox"/>
Mechanical / Electrical Spark <input type="checkbox"/>	Noise <input type="checkbox"/>	Pressurized Line <input type="checkbox"/>	Other Hazard(s): NA

2. Control Measures

Has the equipment mechanically locked to avoid rotation?: No	Has the insulation of electrical equipment been checked before the work start?: No	Have all the hand tools inspected & green tag provided?: No	Have all flammable or combustible material been removed from work site (at least 3 meters away)?: No
Has proper ventilation & lighting provided?: No	Is Fire blanket required & provided?: No	Is fire hydrant & fire water pump system in operation: No	Is a fire extinguisher available and ready?: No
Is gas monitoring carrying for hot work carrying in flammable storage area?: No	Has a fire watch person been assigned while performing hot work? Name.....: No	If sparks fall to lower levels, has adequate protection been provided?: No	Has the work and adjacent areas been isolated with warning tapes and barricades.: No
Flashback arrestor provided on nozzle torch as well as on cylinder regulator: No	Monitor the Hot work area after completing of the work for 1 Hr Name..... Time.....: No	Is the people planned for hot work is well experience & trained: No	Is general safety induction given to the people working in hot work area: No
Is the adequate PPEs listed in Section 3 is available with the work crew: No	If any of the above criteria required is not met, then do not issue the work permit.: NA		

3. Safety Equipment Requirement & PPE to be used

Safety Glasses <input type="checkbox"/>	Nose Mask / Respirators <input type="checkbox"/>	Safety Harness / Lifeline <input type="checkbox"/>	Fire Extinguisher No. <input type="checkbox"/>
Safety Shoes <input type="checkbox"/>	Hand Gloves <input type="checkbox"/>	Ear Plug/ Muff <input type="checkbox"/>	Scaffolds & Ladders <input type="checkbox"/>
LOTO <input type="checkbox"/>	Barricades & Warning Signs <input type="checkbox"/>	Face Shield / Welding Goggle <input type="checkbox"/>	Helmet <input type="checkbox"/>
Forced Ventilation <input type="checkbox"/>	Apron <input type="checkbox"/>	Any Other: <input type="checkbox"/>	LOTO Tag Reference No.: NA

4. Work Permit Authorization

EHS Officer / Coordinator: NA	Plant Head Only for Hot Work, Roof Work & Confined Space: NA
-------------------------------	--

Approvers

Sequence	Name	Status
1	Bishal Mondal	Approved
2	Lalit Aditya Kola	Approved

History

Created On	Created By	Comment	Attachments
------------	------------	---------	-------------

12-Sep-2025 12:30:37 PM	Raj Kumar Pativada	A new record was created: Uid set to 'WP/TTK/COI/HOK/25/00007' Work Permit Status Name set to 'Submit'	
----------------------------	--------------------	--	--