



**Work Permit Report - (Work Permit UID - WP/APR/16J/HWW/25/00013)**

**Work Permit Information**

Work Permit UID	WP/APR/16J/HWW/25/00013	Category Name	Hot Work
Description		Status	NA
Site Name	16 july 2025	Department Name	Computer Science and IT
Location		Initiated By	Lalit Aditya Kola
Start Date & Time	24-Oct-2025 07:00:00 AM	End Date & Time	24-Oct-2025 03:00:00 PM
Created On	24-Oct-2025 10:40:06 AM	Due Date	24-Oct-2025 12:00:00 AM
Contractor	NA	Shift	NA

**Sections**

1. Hazards Identified			
<input type="checkbox"/> 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	<b>Other Hazard(s):</b>
2. Control Measures			

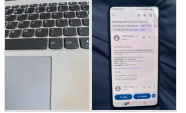
If any of the above criteria required is not met, then do not issue the work permit.:			
YES	NO	NA	Check Points for the Initiator
			Has the equipment mechanically locked to avoid rotation?
			Has the insulation of electrical equipment been checked before the work start?
			Have all the hand tools inspected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

3. Safety Equipment Requirement & PPE to be used			
<input type="checkbox"/> 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:	<b>LOTO Tag Reference No.:</b>

### Approvers

{ApproversDetails}

### History

Created On	Created By	Comment	Attachments
13-Nov-2025 11:02:54 PM	Lalit Aditya Kola	.....	NA
13-Nov-2025 03:45:18 PM	Lalit Aditya Kola	safety	<a href="#">Video 1</a> 
24-Oct-2025 10:40:07 AM	Lalit Aditya Kola	A new record was created: Uid set to 'WP/APR/16J/HWW/25/00013' Category Name set to 'Hot Work' Work Permit Status Name set to 'Submit'	NA