

To be filled before starting the work and first copy to be available at work site with performer (internal / external), the second copy to be submitted to security post, & third copy shall be

retained in the book itself.

1. Under no circumstances permitted work should be carried out after the close time of the work permit.

2. Permit should be returned to the initiator by performer & thereafter submitted to \blacksquare +S Coordinator.

3. Safe work permit request should be raised daily before start of work & permit register shall be available with B+S Coordinator.

Doc. No: ESHMS/P/04

Rev No: 1

Rev Date: 27-Oct-2025

Confined Space Entry Permit

| Permit No. | Date | Time (Max 8 hrs or end of the shift) | Work Performing Department | Location of Work |
|-------------------------|-------------------------|--|----------------------------|------------------|
| WP/TTK/COI/CSE/25/00047 | 27-Oct-2025 11:31:02 AM | From 27-Oct-2025 11:45:00 AM To 27-Oct-2025 12:29:00 PM | Maintenance | |

| Work Description: | |
|-----------------------|--|
| 1. Hazards Identified | |

| Presence of Toxic Gas Fumes | Presence of Flammable Gas Fumes | ✓ Work on Standing Ladder | ✓ Work on Scaffolding | |
|--|------------------------------------|--|------------------------------|--|
| ✓ Slip Hazard Improper Access to reach confined space work area | | Lack of Oxygen Level | ✓ Unguarded Opening | |
| | | Work near sharp edges in vessel inside | Height Work (Above 1.5 Mtr.) | |
| ✓ Sharp Edges Mechanical / Electrical Sparks | | ▼ Trip Hazard | Noise / Vibration | |
| ✓ Excavation Collapse ✓ Steam | | Work near Over Head Electrical Line | Static Electricity | |
| ✓ Work on Running Vessel / Tank | | | | |

Attachments



2. Control Measures

| Name of watch Person: | | | | | |
|-----------------------|----|----|--|--|--|
| YES | NO | NA | Check Points for the Initiator | | |
| ~ | | | Has all piping been isolated by disconnect? (Physical Spool Removal or Blind Provided) | | |
| ~ | | | Has all electrical equipment associated with the vessel been locked out and tagged out & tested out? | | |
| ~ | | | Is vessel clean and free of hazardous residue? | | |
| ~ | | | If not, have appropriate safeguards been taken to assure safe entry? | | |
| ~ | | | Has vessel been mechanically ventilated adequately prior to entry? If required provide the continuous mechanical ventilation. | | |
| ~ | | | Is a ladder inside the vessel and secured? | | |
| ~ | | | Are all entrants wearing a full body harness with life line attached along with the whistle? | | |
| ~ | | | Is entrants register format with name, in time, out time and signature is available. | | |
| | | | Has a watch person is assigned and given proper instructions along with SCBA? | | |
| ~ | | | Has instructions been given to use rubber insulated mats or shoes, when welding or conducting electrical work in a damp or metal confined space? | | |
| ~ | | | Are all electrical tools and in good condition & green tag provided | | |
| | | | Is separate work permit taken for other works like holt work, cold work, etc Confined space entry permit only for entry in the | | |

Use detectors to monitor H2S, Oxygen and LEL level, for all confined space entries

Have instructions been given to watch person to abort the entry if signs and symptoms of exposure occur and/ or the oxygen level drops to 19.5% or rises to 23.5%.

Attachments



space & not to do the work

3. Safety Equipment Requirement & PPE to be used

| ☐ Safety (| ☐ Safety Glasses ☐ Nose | | ☐ Nose Mask / Respirators | | Safety Hamess / Lifeline | | Fire Extinguisher No. | | |
|--------------------------------|--|----------------------------|---|------------------|--------------------------|--|----------------------------|--------------------|----------------------|
| ☐ Hand G | loves | ☐ Ear F | r Plug/ Muff | | | | ✓ Locks/ tags | | |
| Face Shield | / Welding Goggle | | | | Forced Ventilations | | | | |
| ✓ Apron | | ✓ Warn | ing signs | | ₽ 9 | ✓ Safety Shoes | | ✓ Any Other: | |
| LOTO Tag F | Reference No. : | | | | 1 | | | | |
| | | | | | | | | | |
| 4. Work Peri | mit Authorization | | | | | | | | |
| Cross Referr (Other type of | ed Permits – To be fille f Work Permits for Sam | ed by Initiato ne Work) | r | | Permi Permi | t Type: Confined S t No.: WP/TTK/CO | Space Entry OI/CSE/25/0 | 0047 | |
| Employee | | | Site EHS | | | | Plant Head | | |
| Name: VV FLAN Approved On: | | | Name: Mounika Laisetti Approved On: NA | | | Name: Kumar Samarjeet Approved On: NA | | | |
| | | | | | | | | | |
| 5. Permit Ac | ceptance | | | | | | | | |
| | xplained the contents o tions including uses of | | | | supervis | e the job as ment | ion in permi | t. I will assure y | ou to follow all the |
| Name & Sign | n of the Job Performe | er / Contract | or's Supe | ervisor : | Name | & Sign of the P | ermit Initia | tor: | |
| | | | | | | | | | |
| 6. Work Crev | w Tool Box Talk (Atta | ched Separ | ate sheet | t if require) | | | | | |
| S. No. | Name of Person Engaged in Activity | Job Profile Signature | | Signature | | Name of Perso Engaged in Activity | n Job | Profile | Signature |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Contractual Both Signatu | employees covered bures:/ | by ESI or an | y other po | olicy - Yes / NO |) (HR H | ead & Plant Hea | d approval | is required if ı | mentioned as NO) – |
| | | | | | | | | | |

| Work Permit History | | | | | |
|----------------------------|-------------------|---|-------------|--|--|
| Date | Modified By | Comments | Attachments | | |
| 27-Oct-2025 01:09:28 PM | VV PLANT HEAD NEW | Status has been updated to Submitted | NA | | |
| 27-Oct-2025 11:55:13 AM | Mounika Laisetti | Status has been updated to Rejected | NA | | |
| 27-Oct-2025 11:50:48 AM | VV PLANT HEAD NEW | Status has been updated to Partially Approved | NA | | |
| 27-Oct-2025 11:36:30 AM | VV PLANT HEAD NEW | Status has been updated to Submitted | NA | | |
| 27-Oct-2025 11:33:52 AM | Kumar Samarjeet | Status has been updated to Rejected | NA | | |
| 27-Oct-2025 11:31:20 AM | VV PLANT HEAD NEW | Status has been updated to Partially Approved | NA | | |

| 27-Oct-2025 11:31:03 AM VV PLANT HEAD NEW A new record was created: Uid set to 'WP/TTK/COI/CSE/25/00047' Category 'Confined Space Entry' Work Permit St. 'Submit' Department Incharge set to 'Ku | atus Name set to |
|---|------------------|
|---|------------------|