

	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. Note: 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 EHS Coordinator. 3. Safe work permit request should be raised daily before start of work & permit register shall be available with EHS Coordinator.	Doc. No: ESHMS/P/04
		Rev No: 1
		Rev Date: 22-Oct-2025

Electrical Work Permit

Permit No.	Date	Time (Max 8 hrs or end of the shift)	Work Performing Department	Location of Work
WP/TTK/COI/EWW/25/00017	22-Oct-2025 06:00:40 PM	From 23-Oct-2025 04:00:00 PM To 23-Oct-2025 10:00:00 PM	Polishing	

Work Description:						
☐	230 V	☐	440 V	☐	11 KV / Other (Specify)	NA
Equipment being used:		NA				

1. Hazards Identified				
☐ Flammable Materials Nearby	☐ Oil Spillage Observed	☐ Height Work	☐ Work near Over Head Electrical Line	
☐ Improper Access	☐ Moving Machinery	☐ Work on Running Machine	☐ Presence of Toxic Gas Fumes	
☐ Presence of Flammable Gas	☐ Unguarded Opening	☐ Confined Space	☐ Mechanical / Electrical Sparks	
☐ Sharp Edges	☐ Tripp Hazard	☐ Slip Hazard	☐ Excavation Collapse	
☐ Noise	☐ Poor Lighting	☐ Static Electricity	☐ Steam	
☐ Vibration	☐ Pressurized Line	Other Hazards :		
YES	NO	NA	Check Points for the Initiator	
			Combustible Materials Nearby	

2. Control Measures	
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YES	NO	NA	Check Points for the Initiator
			Is LOTO applied on Incoming power supply
			Conducted a thorough inspection of the work area and identified potential electrical hazards
			Ensured all necessary precautions have been taken to mitigate electrical risks
			Verified that all personnel involved in the electrical work activity have received appropriate training and possess the required skills
			Confirmed that all relevant permits, licenses, and authorizations have been obtained
			Verified that the work area is free from any potential electrical hazards or risks
			Ensured proper isolation of electrical equipment from the power source and tagged/locked out
			Provided workers with appropriate personal protective equipment (PPE) for electrical work
			Conducted a final inspection before authorizing the electrical work activity
			Communicated all necessary safety precautions to workers
			Confirmed that appropriate testing equipment, such as voltage testers and multimeters, are available and in proper working condition
			Verified that workers are aware of the proper procedures for electrical isolation, lockout/tagout, and testing before starting work
			Ensured that workers are trained in the safe handling of electrical equipment and materials
			Verified that workers have received proper training on electrical safety
			Established and communicated an emergency response plan

3. Safety Equipment Requirement & PPE to be used			
☐ Rescue Hook	☐ General Hand Gloves	☐ Safety Glasses	☐ Electrical Insulated Gloves
☐ Ear Plug / Muff	☐ Helmet with Face Shield	☐ Arc Protection Suite	☐ Scaffolds & Ladders
☐ Safety Harness / Lifeline	☐ Earth Discharge Rod	Locks / Tags No.:	Fire Extinguisher No.:
☐ Safety Shoes	☐ Barricades & Warning Signs	Any other: :	

4. Work Permit Authorization	
Cross Referred Permits – To be filled by Initiator (Other type of Work Permits for Same Work)	Permit Type: Electrical Work Permit No.: WP/TTK/COI/EWW/25/00017
EHS Head	
Name: Raj Kumar Pativada Approved On: NA	

5. Permit Acceptance	
I have been explained the contents of this permit. I shall be responsible to supervise the job as mention in permit. I will assure you to follow all the safety precautions including uses of required PPE's as per plant guideline.	
Name & Sign of the Job Performer / Contractor's Supervisor :	Name & Sign of the Permit Initiator:

6. Work Crew Tool Box Talk (Attached Separate sheet if require)						
S. No.	Name of Person Engaged in Activity	Job Profile	Signature	Name of Person Engaged in Activity	Job Profile	Signature

Contractual employees covered by ESI or any other policy - Yes / NO (HR Head & Plant Head approval is required if mentioned as NO) – Both Signatures: _____ / _____

Work Permit Closure	
Closure Remarks	
☐ Work completed & Housekeeping done	☐ Work Cancelled due to Operational Reasons
☐ Work Permit Rejected	☒ Work Permit Not Approved
Permit handed over to the EHS Coordinator by initiator after completion of the job & below mentioned details to be filled by initiator.	
Name: _____ Dept: _____ Time: _____ Sign: _____	
Note: This permit to be kept at job site. Work can not be done with rejected permit or without permit & work shall be immediately stopped after permit rejection.	

Work Permit History			
Date	Modified By	Comments	Attachments
23-Oct-2025 04:53:56 PM	Shreya V	Status has been updated to Closed	NA
23-Oct-2025 02:58:12 PM	Raj Kumar Pativada	Status has been updated to Rejected	NA
23-Oct-2025 02:57:47 PM	Shreya V	Status has been updated to Submitted	NA
23-Oct-2025 02:57:47 PM	Shreya V	requesting again	NA
23-Oct-2025 02:55:42 PM	Raj Kumar Pativada	Status has been updated to Rejected	NA
22-Oct-2025 06:00:41 PM	Shreya V	A new record was created: Uid set to 'WP/TTK/COI/EWW/25/00017' Category Name set to 'Electrical Work' Work Permit Status Name set to 'Submit'	NA