

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 Date: 13-Nov-2025

Rev No: 1

Hot Work Permit

| Permit No. | Date | Time (Max 8 hrs or end of the shift) | Work Performing Department | Location of Work |
|-------------------------|----------------------|--|----------------------------|------------------|
| WP/TTK/COI/HOK/25/00118 | 12-Nov-2025 07:21 PM | From 12-Nov-2025 07:20 PM To 13-Nov-2025 06:00 PM | Project and Maintenance | |

| Work Description: | | | | | |
|-------------------------------------|---------------------------|----------------------------|------------------------------|--|--|
| 1. Hazards Identified | | | | | |
| Presence of Toxic Gas Fumes | ☐ Sharp Edges | Poor Lighting | Combustible Materials Nearby | | |
| Work near Over Head Electrical Line | Presence of Flammable Gas | ☐ Tripp Hazard | Static Electricity | | |
| ☐ Flammable Materials Nearby | ☐ Improper Access | Unguarded Opening | Slip Hazard | | |
| ☐ Steam | ☐ Oil Spillage Observed | Moving / Running Machinery | Confined Space | | |
| Excavation Collapse | ☐ Vibration | ☐ Height Work | ☐ Work on Fragile Roofs | | |
| Mechanical / Electrical Spark | □ Noise | Pressurized Line | Other Hazard(s): | | |

Attachments



| 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 equip | ment mechanically locked to avoid ro | otation? | | | |
| | | | Has the insula | ation of electrical equipment been che | ecked before the work start? | | | |
| | | | Have all the h | and tools inspected & green tag provi | ded? | | | |
| | | | Have all flamn | nable or combustible material been re | emoved from work site (at least 3 mete | ers away)? | | |
| | | | Has proper ve | ntilation & lighting provided? | | | | |
| | | | ls Fire blanke | t required & provided? | | | | |
| | | | Is fire hydrant | & fire water pump system in operation | on | | | |
| | | | Is a fire exting | uisher available and ready? | | | | |
| | | | Is gas monito | ring carrying for hot work carrying in f | lammable storage area? | | | |
| | | | Has a fire wat | ch person been assigned while perfor | ming hot work? Name | | | |
| | | | If sparks fall to | o lower levels, has adequate protection | on been provided? | | | |
| | | | Has the work | and adjacent areas been isolated with | h warning tapes and barricades. | | | |
| | | | Flashback am | estor provided on nozzle torch as wel | l as on cylinder regulator | | | |
| | | | Monitor the H | Monitor the Hot work area after completing of the work for 1 Hr Name | | | | |
| | | | Is the people | planned for hot work is well experience | ee & trained | | | |
| | | | Is general safe | Is general safety induction given to the people working in hot work area | | | | |
| | | | Is the adequat | te PPEs listed in Section 3 is availab | le with the work crew | | | |
| 3. Safe | ety Equ | ipment | Requirement | & PPE to be used | | | | |
| | Safety C | Blasses | | ☐ Nose Mask / Respirators | ☐ Safety Hamess / Lifeline | Fire Extinguisher No. | | |
| | Safety S | Shoes | | ☐ Hand Gloves | ☐ Ear Plug/ Muff | ☐ Scaffolds & Ladders | | |
| | ☐ LOTO ☐ Barricades &Warning Signs | | Face Shield / Welding Goggle | ☐ Helmet | | | | |
| ☐ F | Forced \ | /entilati | ion | ☐ Apron | ☐ Any Other: | LOTO Tag Reference No.: | | |
| 4 14/ | | | | | | | | |
| 4. Work Permit Authorization | | | | | | | | |
| | | | nits – To be fille Permits for Sam | | Permit Type: Hot Work Permit No.: WP/TTK/COI/HOK/25/0 | 00118 | | |
| Site EHS E | | | | EHS Head | | | | |
| | Name: Shreya Ved Approved On: 12-Nov-2025 07:21 PM Name: Lalit Aditya Kola Approved On: 13-Nov-2025 12:51 AM | | | | | | | |
| 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 Performe | r / Contractor's Supervisor : | Name & Sign of the Permit Initia | ator: | | |
| 6. Wo | 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 | |
| 13-Nov-2025 12:51 AM | Lalit Aditya Kola | Status has been updated to Approved | | |
| 13-Nov-2025 12:51 AM | Lalit Aditya Kola | 132 | | |
| 12-Nov-2025 07:21 PM | Shreya Ved | Status has been updated to Partially Approved | | |
| 12-Nov-2025 07:21 PM | Shreya Ved | New remark | | |
| 12-Nov-2025 07:21 PM | Lalit Aditya Kola | A new record was created: Uid set to 'WP/TTK/COI/HOK/25/00118' Category Name set to 'Hot Work' Work Permit Status Name set to 'Submit' | | |