

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 B-S Coordinator.

Doc. No: ESHMS/P/04

Rev No: 1

Rev Date: 13-Nov-2025

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/25/00122	13-Nov-2025 12:51 AM	From 13-Nov-2025 12:51 AM To 13-Nov-2025 06:00 PM	25 regression	

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



OQSHA_MOC_2025-11-07_15-52-18-5218_2025-11-13_10-03-05-35_1b895991-8d70-4341-9b5b-afb601f9fffd.csv

2. Control Measures

If any	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 h	and tools inspected & green tag provid	ded?		
			Have all flamn	nable or combustible material been re	moved from work site (at least 3 mete	rs away)?	
			Has proper ve	ntilation & lighting provided?			
			ls Fire blanke	t required & provided?			
			Is fire hydrant	& fire water pump system in operatio	n		
			Is a fire exting	guisher available and ready?			
			Is gas monito	ring carrying for hot work carrying in fl	ammable 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 protectio	n been provided?		
			Has the work	and adjacent areas been isolated with	n warning tapes and barricades.		
			Flashback arr	estor provided on nozzle torch as well	l as on cylinder regulator		
					ork for 1 Hr NameTim	ne	
				planned for hot work is well experience			
			Is general safety induction given to the people working in hot work area				
			Is the adequa	te PPEs listed in Section 3 is availabl	e with the work crew		
3. Safe	ety Equ	ipment	t Requirement	& PPE to be used			
	Safety G	Blasses		☐ Nose Mask / Respirators	☐ Safety Harness / Lifeline	Fire Extinguisher No.	
	Safety S	Shoes		☐ Hand Gloves	☐ Ear Plug/ Muff	☐ Scaffolds & Ladders	
	_OTO			☐ Barricades &Warning Signs	Face Shield / Welding Goggle	☐ Helmet	
□ F	Forced \	/entilati	ion	☐ Apron	☐ Any Other:	LOTO Tag Reference No.:	
			norization		l		
			nits – To be fille Permits for Sam		Permit Type: Hot Work Permit No.: WP/TTK/COI/HOK/25/00122		
Сто					EHS Head		
	ame: Shreya Ved pproved On: 13-Nov-2025 12:52 AM Name: Lalit Aditya Kola Approved On: 13-Nov-2025 03:33 PM						
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	tor:	
6. Woi	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 Permit Rejected				
Permit handed over to the EHS Coordinator by initiator aff	ter 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 03:33 PM	Lalit Aditya Kola	Status has been updated to Approved		
13-Nov-2025 03:33 PM	Lalit Aditya Kola	safety	TTK Prestige	
13-Nov-2025 12:52 AM	Shreya Ved	Status has been updated to Partially Approved		
13-Nov-2025 12:52 AM	Shreya Ved	rewr		
13-Nov-2025 12:52 AM	Lalit Aditya Kola	A new record was created: Uid set to 'WP/TTK/COI/HOK/25/00122' Category Name set to 'Hot Work' Work Permit Status Name set to 'Submit'		