

o 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 ecurity post, & third copy shall be retained in the book itself.

oue:

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

Fermit should be returned to the initiator by performer & thereafter submitted to EFS coordinator.

Safe work permit request should be raised daily before start of work & permit register shall be availat.

Doc. No: ESHMS/P/04 Rev No: 1 Rev Date: 10-Oct-2025

# Lalit's Test PTW Type Permit

Permit No.	Date	Time (Max 8 hrs or end of the shift)	Work Performing Department	Location of Work
WP/TTK/COI/LTP/25/00013	10-Oct-2025 05:39 PM	From 10-Oct-2025 07:00 PM To 10-Oct-2025 10:00 PM	Maintenance	

Work Description:

1. Hazards Identified

: 0

### checks

✓ Flammable Materials Nearby	✓ Oil Spillage Observed	☐ Height Work
✓ Presence of Toxic Gas Fumes	Presence of Flammable Gas	Confined Space

Attachments

# RITISHA

## 2. Control Measure

: 0

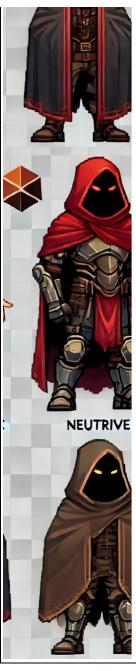
## radios

Yes	No	NA	Question	
		NA	Is LOTO applied on Incoming power supply	
		NA	Conducted a thorough inspection of the work area and identified potential electrical hazards	
		NA	insured all necessary precautions have been taken to mitigate electrical risks	
		NA	Verified that all personnel involved in the electrical work activity have received appropriate training and possess the required skills	
YES			Confirmed that all relevant permits, licenses, and authorizations have been obtained	
		NA	Verified that the work area is free from any potential electrical hazards or risks	
		NA	Provided workers with appropriate personal protective equipment (PPE) for electrical work	
		NA	Communicated all necessary safety precautions to workers	

Attachments







Work Permit Authorization				
	Permit Type: Lalit's Test PTW Type Permit No.: WP/TTK/COV/LTP/25/00013			
EHS Head				
Name: Lalit Aditya Kola Approved On: 10-Oct-2025 05:39 PM				

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:

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 FSI or any other policy - Yes / NO (HR Head & Plant Head approval is required if mentioned as NO) – Both Signatures:						

Work Permit Extension					
Permit Extension to the Next Shift - No Extension for Roof Work, Confined Space activity after 6 pm					
Should the permit be extended the affected / next operating shift will be fully informed					
Work Permit Extension for next shift (Mention Date & Time For Extension)	Permit Initiator	Job Performer	Permit Hand Over By	Permit Take Over By	Extension Requested (Hours)

Work Permit Closure	
Permit handed over to the EHS Coordina	tor by initiator after completion of the job & below mentioned details to be filled by initiator.
NameDept	
Note: Th	s permit to be kept at job site. Work can not be done with rejected permit or without permit & work shall be immediately stop after permit rejection.

Work Permit History					
Date	Modified By	Comments	Attachments		
10-Oct-2025 05:39 PM	Lalit Aditya Kola	Status has been updated to Approved			
10-Oct-2025 05:39 PM		A new record was created: Uid set to WP/TTK/COI/LTP/25/00013' Category Name set to "Lalit's Test PTW Type' Work Permit Status Name set to "Submit"			