

	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 E-S Coordinator. 3. Safe work permit request should be raised daily before start of work & permit register shall be available with E-S Coordinator.	Doc. No: ESHMS/P/04
		Rev No: 1
		Rev Date: 31-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/25/00014	31-Oct-2025 12:04 PM	From 31-Oct-2025 11:59 AM To 31-Oct-2025 06:00 PM	Polishing	

Work Description:	
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1. Hazards Identified
: 0

checks			
<input type="checkbox"/> Combustible Materials Nearby	<input type="checkbox"/> Flammable Materials Nearby	<input type="checkbox"/> Oil Spillage Observed	<input type="checkbox"/> Height Work
<input type="checkbox"/> Improper Access	<input type="checkbox"/> Presence of Toxic Gas Fumes	<input type="checkbox"/> Presence of Flammable Gas	<input type="checkbox"/> Confined Space

Attachments
No images available
Certificate_Batch6573_User63543_2025-10-31_06-34-05-345_5f2e1153-2570-49fe-93e5-37bacb67a2b6.pdf

2. Control Measure
: 0

radios			
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
			Provided workers with appropriate personal protective equipment (PPE) for electrical work
			Communicated all necessary safety precautions to workers

Attachments

4. Work Permit Authorization	
Cross Referred Permits – To be filled by Initiator (Other type of Work Permits for Same Work)	Permit Type: Lalit's Test PTW Type Permit No.: WP/TTK/COI/LTP/25/00014
EHS Head	
Name: Lalit Aditya Kola Approved On: 31-Oct-2025 08:10 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 Performer / Contractor's Supervisor :	Name & Sign of the Permit Initiator:

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
<div> <input type="checkbox"/> Work completed & Housekeeping done <input type="checkbox"/> Work Cancelled due to Operational Reasons </div> <div> <input type="checkbox"/> Work Permit Rejected <input type="checkbox"/> Work Permit Not Approved </div>
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
31-Oct-2025 08:10 PM	Lalit Aditya Kola	Status has been updated to Approved	
31-Oct-2025 08:10 PM	Lalit Aditya Kola	Approving	
31-Oct-2025 12:04 PM	Raj Kumar Pativada	A new record was created: Uid set to 'WP/TTK/COI/LTP/25/00014' Category Name set to 'Lalit's Test PTW Type' Work Permit Status Name set to 'Submit' Department Incharge set to 'Sephali Kumari Singh (API DEVELOPER)'	