

HOT WORK PERMIT

Hot Work
 PERMIT NUMBER _____ CONFINED SPACE ENTRY PERMIT NUMBER (required) _____

This Hot Work Permit is to be attached to the Confined Space Entry Permit.

Date _____ Time _____ Shift _____ Duration of Permit (REQUIRED) _____

Issued to _____ Department _____

Location of work _____

Description of work _____

PRECAUTIONS	
Atmosphere Tested Acceptable Yes No N/A	
Combustibles Removed/Covered Yes No N/A	
Fire Extinguisher Available Yes No	
Other:	

Workers _____, and _____
 (If Entrants, MUST also be listed on Confined Space Entry Permit AND Entrant Roster.)

and _____, and _____

Contractor agrees to ensure that all Hot Work requirements, including safety, are followed. (If contractor is doing work.)

Contractor Rep. _____ Company _____
Date/Time

I have checked each step in preparing to do this work and am satisfied that that this permit accurately represents the steps taken to ensure safe Hot work.

JMU Facilities Management Supervisor _____

_____ Printed
_____ Signature
_____ Date/Time(AM/PM)

This "Hot Work" Permit is CANCELED:

By _____

JMU FM Supervisor (Printed)
Signature
Date/Time (AM/ PM)