

UNIVERSITY OF VERMONT - PHYSICAL PLANT DEPARTMENT

CONFINED SPACE ENTRY PERMIT

THIS PERMIT MUST BE POSTED ON THE JOBSITE - VALID ONLY FOR INDICATED DATE

	S	SECTION I - P	ermit Type						
☐ This is a "Pe	ermit-Required" Confined Space Entry		is is a Certifica	te for a "Non-Porm is being used	_	_	ace Entry		
	SECT	ΓΙΟΝ II - Gene			Tor procuumon	ary parposes,			
Confined Space #:	Confined Sp.	ice Type :		Location :					
Purpose of Entry:		Anticipated Permit Duration (Max=1 Shift):			Date of Entry : Permit Start Time :				
Supervisor :	Phone #:				Permit End Time :				
	SECTION III	I - Personnel (A	ttach List if	f Necessary)					
Position	Name	Time/In	Time/Out	Time/In	Time/Out	Time/In	Time/Out		
Attendant		NOT	E: ATTENI	DANT(S) SH	ALL NEVE	R ENTER	SPACE!		
Entrant									
Entrant									
Entrant									
Entrant									
		IV - Hazards (l							
List All Hazard(s) A	ssociated With This Entry (Refer to	site specific "L	niversity of V	<u>/ermont Confi</u>	ned Space E	ntry Informa	<u>tion") :</u>		
	SECTION V - Pre-Entry Prepare	arations		SECT	ΓΙΟΝ VI - E	Quipment Is	solation		
☐ Drained ☐ Flushed	☐ Inerted ☐ Purged ☐ Ventilated ☐ (_ □ N/A							
Openings: Barricac Specify Procedures:	r	□ N/A	Lines : □ Bled □ Blanked □ Other □ □ N/A Specify Procedures :						
	SECTION VII - Communic	ation		SECTIO	N VIII - Ad	ditional Saf	ety Permits		
□ Voice □ Visual	SECTION VII COMMUNIC	ation		SECTIO	11 7 111 114	untional sai	ety i crimits		
i voice i visual	□ Radio □ Cell Phone □ Re	one Signals		☐ Hot Work	☐ Health &	Safety Plan			
	☐ Radio ☐ Cell Phone ☐ Ro	ope Signals		☐ Hot Work	☐ Health &	•			
Other			Rescue/Eme	□ Other		Safety Plan	_		
☐ Other	SECTION IX - Co	onfined Space l		□ Other	onse	□ N/A	ORY!		
Other	SECTION IX - Co	onfined Space I	PRIOR TO & A	□ Other rgency Respo	onse On OF ENTR	□ N/A Y - MANDAT	ORY!		
☐ Other	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller:	onfined Space I SOS) @656-2560 I	PRIOR TO & A	Other rgency Response AT COMPLETI(Start) T	onse	□ N/A Y - MANDAT	ORY!		
☐ Other	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller: SECTION X -	onfined Space I SOS) @656-2560 I Tim - Personal Prot	PRIOR TO & A e Called : ective Equip	Other rgency Response T COMPLETI (Start) T coment (PPE)	ON OF ENTR	□ N/A Y - MANDAT (End)	ORY!		
NOTIFY UV	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X -	onfined Space I SOS) @656-2560 I Tim - Personal Prot	PRIOR TO & A e Called : ective Equip	Other	ON OF ENTR ime Called :	□ N/A Y - MANDAT (End)	ORY!		
NOTIFY UV	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller: SECTION X -	onfined Space I SOS) @656-2560 I Tim - Personal Prot	PRIOR TO & A e Called : ective Equip	Other	ON OF ENTR ime Called :	□ N/A Y - MANDAT (End)	ORY!		
NOTIFY UV	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X - Respiratory P	SOS) @656-2560 I Tim - Personal Protection: othing:	PRIOR TO & A e Called : ective Equip	Other	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End)	ORY!		
NOTIFY UV Call Placed to SOS Head Protection: Hearing Protection:	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X - Respiratory P Protective Cl	SOS) @656-2560 I Tim - Personal Protection: othing:	PRIOR TO & A e Called : ective Equip	□ Other rgency Response T COMPLETI (Start) T Toment (PPE) □ □ Footwea □ Face/Eye Property T Complete T Co	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End)	ORY!		
NOTIFY UV Call Placed to SOS Head Protection: Hearing Protection:	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X - Respiratory P Protective Cl 1 :	Donfined Space I SOS) @656-2560 I Tim - Personal Protection: othing:	PRIOR TO & A e Called : ective Equip	□ Other rgency Response T COMPLETI (Start) T Toment (PPE) □ □ Footwea □ Face/Eye Property T Complete T Co	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End)	ORY!		
NOTIFY UV Call Placed to SOS Head Protection: Hearing Protection: Arm/Hand Protection	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : Respiratory P Protective Cl n : Othe SEC	onfined Space I SOS) @656-2560 I Tim - Personal Prof Protection: othing: er: TION XI - Saf	PRIOR TO & A e Called : ective Equip	☐ Other ☐ rgency Response ☐ (Start)	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End) N/A	ORY!		
NOTIFY UV Call Placed to SOS Head Protection: Hearing Protection: Arm/Hand Protection	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : Respiratory P Protective Cl n : Othe SEC	Donfined Space I SOS) @656-2560 I Tim - Personal Prot Protection: othing: er: TION XI - Saf Other:	PRIOR TO & A e Called: ective Equip ety Equipmo	Other rgency Response T COMPLETI (Start) T Toment (PPE) Face/Eye Proceed itoring	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End) N/A	ORY!		
NOTIFY UVN Call Placed to SOS Head Protection: Hearing Protection: Arm/Hand Protection	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X - Respiratory P Protective Cl 1: SECTION SE	Donfined Space I SOS) @656-2560 I Tim - Personal Prot Protection: othing: er: TION XI - Saf Other:	PRIOR TO & A e Called: ective Equipment ety Equipment pheric Mon or ATMOSPH	Other rgency Response T COMPLETI (Start) T Toment (PPE) Face/Eye Properties itoring ERIC MONITO	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End) N/A	ORY!		
□ Other	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X - Respiratory P Protective Cl n : SECTION	Donfined Space I SOS) @656-2560 I Tim - Personal Prot Protection: othing: er: CTION XI - Saf Other: DN XII - Atmos	PRIOR TO & A e Called: ective Equipment ety Equipment pheric Mon or ATMOSPH	□ Other □ rgency Response Complete □ (Start) Toment (PPE) □ □ Footwea □ Face/Eye Properties □ itoring □ ERIC MONITO	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End) N/A □ N/A	ORY!		
NOTIFY UV Call Placed to SOS Head Protection: Hearing Protection: Arm/Hand Protection	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X - Respiratory P Protective Cl 1: SECTION SECTION SECTION SECTION ************************************	Donfined Space I SOS) @656-2560 I Tim - Personal Prot Protection: othing: er: TION XI - Saf Other: DN XII - Atmos	PRIOR TO & A e Called: ective Equipme ety Equipme pheric Mon or ATMOSPH mit Cancella	□ Other □ rgency Response Complete □ (Start) Toment (PPE) □ □ Footwea □ Face/Eye Properties □ itoring □ ERIC MONITO	ON OF ENTR ime Called : r : otection :	□ N/A Y - MANDAT (End) N/A □ N/A	ORY!		
□ Other □ NOTIFY UVN □ Call Placed to SOS □ Head Protection : □ Hearing Protection : □ Arm/Hand Protection □ Safety Harness/Lifeli □ Permit Ended/Canceled	SECTION IX - Co M SERVICE OPERATION SUPPORT (Name of Caller : SECTION X - Respiratory P Protective Cl n: Oth SEC ine (if>5') Tripod/Winch Davit SECTION ************************************	onfined Space I SOS) @656-2560 I Tim - Personal Protection: othing: er: CTION XI - Saf Other: DN XII - Atmos EVERSE SIDE FOI ION XIII - Per	ective Equipment of the Equipment of Equipme	□ Other □ rgency Response Complete □ (Start) Toment (PPE) □ □ Footwea □ Face/Eye Protect □ toring □ ERIC MONITO ation □ Date :	ON OF ENTR ime Called : r : otection : DRING******	□ N/A Y - MANDAT (End) N/A □ N/A	ORY!		
□ Other □ NOTIFY UVN □ Call Placed to SOS □ Head Protection : □ Hearing Protection : □ Arm/Hand Protection □ Safety Harness/Lifeli □ Permit Ended/Canceled	SECTION IX - Communication Support (Name of Caller :	onfined Space I SOS) @656-2560 I Tim - Personal Prof Protection: othing: er: OTION XI - Saf Other: ON XII - Atmos EVERSE SIDE FO ION XIII - Per	e Called :ective Equipment Equipment Mon R ATMOSPHI mit Cancella (Signature) ney Situation (P	□ Other □ regency Response Complete I compl	ON OF ENTR ime Called : r : otection : DRING******	□ N/A Y - MANDAT (End) N/A □ N/A	ORY!		
□ Other □ NOTIFY UVN □ Call Placed to SOS □ Head Protection : □ Hearing Protection : □ Arm/Hand Protection □ Safety Harness/Lifeli □ Permit Ended/Canceled	SECTION IX - Communication Support (Name of Caller :	onfined Space I SOS) @656-2560 I Tim - Personal Protection: othing: er: CTION XI - Saf Other: DN XII - Atmos EVERSE SIDE FOI ION XIII - Per	e Called :ective Equipment Equipment Mon R ATMOSPHI mit Cancella (Signature) ney Situation (P	□ Other □ regency Response Complete I compl	ON OF ENTR ime Called : r : otection : DRING******	□ N/A Y - MANDAT (End) N/A □ N/A	ORY!		
□ Other □ NOTIFY UVN □ Call Placed to SOS □ Head Protection : □ Hearing Protection : □ Arm/Hand Protection □ Safety Harness/Lifeli □ Permit Ended/Canceled	SECTION IX - Communication Support (Name of Caller :	onfined Space I SOS) @656-2560 I Tim - Personal Prof Protection: othing: er: OTION XI - Saf Other: ON XII - Atmos EVERSE SIDE FO ION XIII - Per	e Called :ective Equipment Equipment Mon R ATMOSPHI mit Cancella (Signature) ney Situation (P	□ Other □ regency Response Complete I compl	ON OF ENTR ime Called : r : otection : DRING******	□ N/A Y - MANDAT (End) N/A □ N/A	ORY!		
□ Other	SECTION IX - Communication Support (Name of Caller :	onfined Space I SOS) @656-2560 I Tim - Personal Prot Protection : othing : er : TION XI - Saf	ective Equipment Equipment Equipment Monor RATMOSPH mit Cancella (Signature) new Situation (PAdditional Cancella)	□ Other rgency Response T COMPLETI (Start) T Toment (PPE) □ Footweat □ Face/Eye Protect itoring ERIC MONITO ation Date: lease Describe in Comments	ON OF ENTR ime Called : r : otection : DRING****** To a Detail)	□ N/A Y - MANDAT (End) N/A N/A □ N/A			

	SECTIO	N XII ·	- Atmos	pheric l	Monito	ring (At	tach Ac	dditiona	l Sheet	(s) if Ne	cessary)	
Equipmer	nt Make, Model: Scientific iTX Mi	ulti-Gas N		dustrial	Serial # ((last 3 dig	its):	Tester's S	Signature:				
	,	Continuous/Constant Monitoring Acceptable (Monitor Carried w/ Conditions Entrant at all Times)		Pre-Entry Checks (Top/Middle/Bottom)		After Ventilation and/or Isolation (Top/Middle/Bottom)			Periodic Checks (Top/Middle/Bottom)				
Hazard	_												
Oxygen	19.5% - 23.5%												
LEL	<10%												
H2S	<2 ppm												
CO	<10 ppm												
Other:													
	TIME INITIALS		:		:	:	:	:	:	:	:	:	:
	Periodic Checks			Periodic Checks		Periodic Checks			Periodic Checks				
	Acceptable	ble											
Hazard	Conditions	(Top/	Middle/B	ottom)	(Top/	Middle/B	ottom)	(Top/Middle/Bottom)			(Top/Middle/Bottom		
Oxygen	19.5% - 23.5%												
EL	<10%												
I2S	<2 ppm												
CO	<10 ppm												
Other:													
	TIME	:	:	:	:	:	:	:	:	:	:	:	:
	INITIALS												
			CONI	FINED S	SPACE	PERM	IT INS	TRUCT	IONS				
Confined S	Spaces have all of	the follow	ving:			1) Large	enough to	bodily er	iter and p	erform ass	igned wo	rk;	
						2) Has li	mited or r	estricted r	neans for	entry or ex	xit; and		
						3) Is not	designed	for contin	uous emp	loyee occu	ipancy.		
Permit-Re	quired Confined	Spaces h	ave one o	r more of	the follow	ing chara	cteristics:						
						1) Conta	ins a knov	vn or pote	ntially ha	zardous at	mosphere	;	
2) Contains a material that can engulf entrants (i.e. water, sand);													
3) Has an internal configuration that could entrap entrants; or4) Contains any other recognized serious safety or health hazard.													
						4) Conta	ins any ot	her recogr	ized seri	ous safety	or health	hazard.	
PRIOR TO	O ENTRY : Obtai	in a copy	of the "C	Confined	Space E	ntry Infor	mation."	Review a	all applic	able UVN	l policies	<u>, and</u>	
	ral regulations.												
	I - Check the box												
ECTION	II - Fill in entry i	nformatic	on. It is in	nportant to	o note ent	ry date an	d time, as	well as ex	pected p	ermit durat	tion.		
	III - Fill in all pe				•		•	ons" (i.e. a	ttend., en	tr., supervi	sor).		
	IV - List all expe					ific as pos	ssible.						
	V - Check off all												
SECTION VI - Check off all equipment that is isolated prior to the entry.													

SECTION VI - Check off all equipment that is isolated prior to the entry.

SECTION VII - Check off the type(s) of communication between the attendant(s) and entrant(s) that will be utilized.

SECTION VIII - List additional safety permits that are required [i.e. Hot Work, Health and Safety Plan (HASP), or other].

SECTION IX - Call SOS (656-2560) before and after entry. SOS will page the Confined Space Rescue Team (CSRT).

SECTION X - Check and describe specific PPE that will be utilized. Call the TCO (656-SAFE) with PPE questions.

SECTION XI - Check and describe specific safety equipment that will be utilized.

SECTION XII - Fill in atmospheric monitoring information. Monitoring must be conducted initially, following ventilation and/or isolation, periodically (every 10-30 mins unless otherwise determine), or continuously.

SECTION XIII - When entry is complete, the Supervisor shall sign off on the permit, and note reason for permit cancellation.

SECTION XIV - Fill in any additional information as needed.

TCO PERM	IIT REVIEW
(For Office	Use Only)