

## Confined Space Assessment Form

**Instructions:** All confined spaces must be assessed using this form. The purpose of this form is to identify the hazards and characteristics of a space to determine if it is a non-permit required space or a permit-required confined space. This assessment does not replace a Confined Space Entry Permit. This assessment must be reviewed by the entry team prior to any entry into a permit-required confined space.

| Section A: General Information          |   |  |        |                          |  |  |              |  |                                   |    |      |
|---|---|--|--------|--------------------------|--|--|--------------|--|-----------------------------------|----|------|
| 1                                       | Name:   |  |        | Type of Space:           |  |  |              |  |                                   |    |      |
| 2                                       | Date of Assessment:   |  |        | Assessment Conducted by: |  |  |              |  |                                   |    |      |
| 3                                       | Location:   |  |        |                          |  |  |              |  |                                   |    |      |
| Section B: Confined Space Determination |   |  |        |                          |  |  |              |  | Yes                               | No |      |
| 4                                       | The space is large enough and is so configured that an employee can bodily enter and perform assigned work.   |  |        |                          |  |  |              |  |                                   |    |      |
| 5                                       | The space has limited or restricted means of entry or exit.   |  |        |                          |  |  |              |  |                                   |    |      |
| 6                                       | The space is not designed for continuous employee occupancy.  |  |        |                          |  |  |              |  |                                   |    |      |
| 7                                       | If items 4-6 were all marked <b>Yes</b> , then the space is considered a confined space; proceed to the next section.<br>If you answered <b>No</b> to 4, 5, or 6, the space is not a confined space; check the box below. |  |        |                          |  |  |              |  |                                   |    |      |
|   | The space does not qualify as a "confined space":   |  |        |                          |  |  |              |  |                                   |    |      |
| Section C: Atmospheric Hazards          |   |  |        |                          |  |  |              |  | Yes                               | No |      |
| 8                                       | Does the space have or have the potential to contain a hazardous atmosphere?<br><i>If Yes, check the hazard(s) below.</i>   |  |        |                          |  |  |              |  |                                   |    |      |
| 9                                       | Oxygen Deficient (O <sub>2</sub> below 19.5%):  |  |        |                          | Oxygen Enriched (O <sub>2</sub> above 23.5%):  |  |              |  | Explosive Gas/Vapor:              |    |      |
| 10                                      | Hydrogen Sulfide (H <sub>2</sub> S):  |  |        |                          | Carbon Monoxide (CO):                          |  |              |  | Chlorine (Cl <sub>2</sub> ):      |    |      |
| 11                                      | Other (specify):  |  |        |                          |  |  |              |  |                                   |    |      |
| Section D: Engulfment Hazards           |   |  |        |                          |  |  |              |  | Yes                               | No |      |
| 12                                      | Does the space have the potential to engulf or suffocate the entrant?<br><i>If Yes, check the hazard(s) below.</i>  |  |        |                          |  |  |              |  |                                   |    |      |
| 13                                      | Sand:   |  | Water: |                          | Soil:  |  | Gravel/Rock: |  | Sewage:                           |    | Oil: |
| 14                                      | Other (specify):  |  |        |                          |  |  |              |  |                                   |    |      |
| Section E: Entrapment Hazards           |   |  |        |                          |  |  |              |  | Yes                               | No |      |
| 15                                      | Does the space have an internal configuration that an entrant could become trapped?<br><i>If Yes, check the hazard(s) below.</i>  |  |        |                          |  |  |              |  |                                   |    |      |
| 16                                      | Converging Walls/Downward Sloping:  |  |        |                          | Constriction/Taper to a Smaller Cross-Section: |  |              |  | Difficult Exit/Inadequate Access: |    |      |
| 17                                      | Other (specify):  |  |        |                          |  |  |              |  |                                   |    |      |

| Section F: Other Serious Hazards  |   |  |                                   |  |                      |  |             |  |        | Yes | No       |  |                 |  |
|---|---|--|-----------------------------------|--|----------------------|--|-------------|--|--------|-----|----------|--|-----------------|--|
| 18  | Is there a potential for any other serious safety and health hazards?<br><i>If Yes, check the hazard(s) below.</i>  |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| 19  | Electrical:   |  | Moving Parts:                     |  | Slips/Trips/Falls:   |  |             |  |        |     |          |  |                 |  |
| 20  | Hot/Cold Extremes:  |  | Noise/Vibration:                  |  | Chemicals:           |  |             |  |        |     |          |  |                 |  |
| 21  | Skin/Eye Irritants:   |  | Pressurized Steam/<br>Condensate: |  | Unguarded Machinery: |  |             |  |        |     |          |  |                 |  |
| 22  | Pneumatic Energy:   |  | Hydraulic Energy:                 |  | Stored Energy:       |  |             |  |        |     |          |  |                 |  |
| 23  | Other (specify):  |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| Section G: Access   |   |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| 24  | Fixed Ladder:   |  | Portable Ladder:                  |  | Stairs:              |  | Door:       |  | Hatch: |     | Manhole: |  | Lowering Winch: |  |
| 25  | Other (specify):  |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| Section H: Ventilation  |   |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| 26  | None:   |  | Unfavorable Natural:              |  | Favorable Natural:   |  | Mechanical: |  |        |     |          |  |                 |  |
| 27  | Mechanical ventilation is required in the space:  |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| Section I: Rescue   |   |  |                                   |  |                      |  |             |  |        | Yes | No       |  |                 |  |
| 28  | Does the space have an internal configuration where non-entry rescue equipment (e.g., tripod and winch) will be <b>effective</b> in rescuing the entrant?   |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| 29  | Does the space have an internal configuration where non-entry rescue equipment (e.g., tripod and winch) may be <b>ineffective</b> in rescuing the entrant, depending on where the work is being performed inside the space? |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| 30  | Will a standby rescue service be required outside the space if non-entry rescue equipment is <b>ineffective</b> in rescuing the entrant?  |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| Section J: Determination  |   |  |                                   |  |                      |  |             |  |        | Yes | No       |  |                 |  |
| 31  | Is the space a Permit-Required Confined Space?<br><i>If items 8, 12, 15, or 18 were marked Yes, a permit is required to enter the space.</i>  |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| Section K: Notes  |   |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| 32  |   |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| Section L: Hazardous Energy Isolation   |   |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |
| Hazards indicated in sections C through F may require isolation or de-energization in accordance with Northwestern's Control of Hazardous Energy (Lockout/Tagout) Program <b>prior to entry</b> . |   |  |                                   |  |                      |  |             |  |        |     |          |  |                 |  |