CONFINED SPACE ENTRY PERMIT

Use this permit when entering a permit-required confined space, which is only valid for the duration of work being performed and for no more than 8 hours. Safe Operating Procedures (SOPs) are required in addition to this permit. Post this permit at or near the entry point. An attendant is required outside the space and must maintain communication with the entrant(s) and have a means to summon rescue services (e.g., 911). Review confined space assessments and the work to

must maintain communication with the entrant(s) and have a means to summon rescue services (e.g., 911). Review confined space assessments and the work to be performed to determine the entry requirements.													
General													
Space to be Entered:								Date & Time	a Issued.				
Location of Space:								& Time of Ex					
Purpose of Entry:								artment or Co					
Entrant(s):													
Attendant(s):													
			Re	equir	em	nents							
Assessment Reviewed:	Requirements □ None □ Atmospheric □ Entrapment □ Engulfment/Sufform □ Steam □ Condensate □ Other (Specify)										Suffoo	cation	
Special Require	ments	Y	Yes N/A			Special Equipment						Yes	N/A
Secure Area or Work Zone (e.g., barricading, fencing-off)						Fire Extin	ire Extinguisher (not CO ₂)						
Pumps / Lines Blanked, Blocked, Capped (i.e., LOTO)							Special Lighting (e.g., explosion-proof)						
Purging, Flushing, Venting of Utility Lines								WET (i.e., forced-air ventilation)					
Other Permits (e.g., Hot Work): (specify)				Water Pumps									
Other Special Requirements:	(specify) Other Equipment: (specify)												
Energy Sources Isolated:	Li Otrier (specify)										m 🗆	Conden	nsate
Entrant Communication:	trant Communication: ☐ Radio ☐ Cellular Phone ☐ Visual ☐ Verbal ☐ Fixed Telephone ☐ Other (specify)												
Required Personal Protective											uffs □	Respir	rator
Equipment:	☐ Safety Sho	oes/Boots □	I Long	Sleev	ves/	/Pan <u>ts</u> □] Bod	dy Protection	☐ Other (specify	")			
						Testing							
		Pre-Entry Time During Entry - Record Readings Every 2 Hours									ours		
Atmospheric Gases	Permissible Limits		Time				(8-hour maximum)						
(test in this order)	(must be with	in limits)		AM	Г	A۱		AM	AM		AM		AM
				PM	<u> </u>	PN	٧	PM	PM		PM		PM
Oxygen (O ₂)	ygen (O ₂) 19.5% to 23.5%		9/				%		%	%			%
Lower Explosive Limit (LEL)	, ,		9			%		%	%	%			%
Carbon Monoxide (CO)	arbon Monoxide (CO) Under 35 ppm		ppr			ppm		ppm ppm		F	opm		ppm
Hydrogen Sulfide (H ₂ S)	Under 10 ppm		ppr			ppm		ppm	om ppm ppr		opm		ppm
Other: (specify)													
1 11 21	(specify) Tester's	Initials:											
Monitoring Equipment Make and Model				Serial Number				Calibration Date B					Yes
y												sed prior	
											use? quired)		
Rescue													
Rescue Me	ethod		Yes		V/A			Attendar	t Requirement			Yes	N/A
Non-Entry Retrieval Equipment (e.g., tripod, lifeline, hoist, harnes				3 1	W/A	_	d in t		on-Entry Equipr			103	11/7
Rescue Service On-Site (SCBAs, entry retrieval equipment)				+							4)		
Rescue Service On-Site (SCBAs, entry retrieval equipment) Has Means to Summon Rescue Services (required) Rescue Communication:											•)		
Northwestern Police Notified Prior to Entry: Evanston Campus (847) 491-3456 Chicago Campus (312) 503-3456													
Authorization													
I have reviewed the work authorized by this permit and the information contained herein. This permit is not valid unless all appropriate items are													
completed. I certify that all actions and conditions necessary for safe entry have been performed.													
Entry Supervisor: (print): (sign): (title):													
Cancellation													
Entry will be terminated and this permit will be cancelled when the entry operations covered by the permit have been completed or a condition that is not allowed under the entry permit arises in or near the permit space. Re-entry into the confined space will not be allowed until a new													
is not allowed under the enti	ry permit arise								a space wiii noi	be allowe	∌a unti	ıı a new	'
This permit must be cance	alled by the Er	assessment							vironmental He	alth and	Safatı	, (EUG)	
Permit Cancelled by:	ned by the En	illy Supervis	or and	u Sub)IIIII	illeu lo Ni	טונווע		& Time:	aitii aiiu	Salety	(ENS)	•
Reason: \(\square\) Work	Complete D	Rascua I Inav	/ailahle		Cor	nditions Vi	iolate			□ Other (c	if-/		