PERMIT-REQUIRED CONFINED SPACE RECLASSIFICATION FORM

Use this form to temporarily reclassify a permit-required confined space to a non-permit-required confined space, which is only valid for the work being performed and no more than 8 hours. The space must be free from actual or potential atmospheric hazards, and all hazards within the space must be eliminated without requiring entry into the space. Use the QR code to review the confined space assessment and applicable lockout tagout procedures. For questions, contact Environmental Health and Safety at ehs@northwestern.edu.

General

Confined Space Assessments and Lockout/Tagout (LOTO) Procedures for Reclassification

Space to be Entered:	
Location of Space:	
Purpose of Entry:	
Department or Contractor:	
Entrant Name(s):	
Date & Time Issued:	
Date & Time of Expiration (8 hours maximum):	

Requirements

Personal Protective Equipment	☐ Gloves ☐ Safety Glasses ☐ Goggles ☐ Face Shield ☐ Hardhat ☐ Ear Plugs/Earmuffs ☐ Respirator ☐ Body Protection ☐ Safety Shoes/Boots ☐ Long Sleeves/Pants ☐ Other (specify)

Hazards	Yes	No	If **Yes**, describe how the hazard was eliminated without entry
1. Does the space contain or have the potential to contain a hazardous atmosphere? *Note*: Control of atmospheric hazards through forced air ventilation does not constitute elimination of hazards.		X	If **Yes**, reclassification is not permitted.
2. Does the space contain entrapment hazards? (e.g., converging walls, downward sloping, constriction/taper to a small cross-section, difficult to exit)		X	If **Yes**, reclassification is not permitted.
3. Does the space contain steam or condensate utility piping or equipment?		X	If **Yes**, reclassification is not permitted.
4. Does the space, or work performed outside of the space, introduce potential for other safety and health hazards? (e.g., extreme temperatures, chemicals, dust, fumes, welding, noise, etc.)		X	If **Yes**, reclassification is not permitted.
5. Will the work be performed on or potentially compromise utilities (e.g., electrical, piping, equipment), or are there visible or suspected leaks, corrosion, damage, or compromised utilities in the space?			
6. Does the space have inadequate or unsafe access, fall hazards 4 feet or more to a lower level, or a walking-working surface that cannot support the maximum intended load?			
7. Does the space have the potential to engulf or suffocate the entrant? (e.g., water, sewage)			
8. Does the space contain hazardous energy? (e.g., unguarded energized electrical circuits, machinery, moving parts, etc.) *Note that all hazardous energy must be isolated prior to entry pursuant to the Northwestern Control of Hazardous Energy (Lockout/Tagout) Program.*			

Certification and Authorization

I certify that the above information is true and that all hazards within the space have been eliminated before entry. I certify that all actions and conditions necessary for safe entry have been performed to temporarily reclassify the permit-required confined space to a non-permit-required confined space.

Entry Supervisor:	(print):	(sign):	(title):

Cancellation

If hazards arise within a permit-required confined space that has been reclassified to a non-permit-required confined space, the space must be evacuated immediately. The space must be reevaluated to determine whether it must be reclassified as a permit-required confined space. Entry will be terminated, and this form will be cancelled, when the entry operations covered by this form have been completed, or when a condition that is not allowed under this form arises in or near the space.
Form must be cancelled by the Entry Supervisor and kept on file by the department for 3 years.

Formed Cancelled by:		Date & Time:	
Reason:	☐ Work Complete ☐ Conditions Violate Form ☐ New Hazards ☐ Other (specify)		