

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 Yes , then the space is considered a confined space; proceed to the next section. If you answered No 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? <i>If Yes, check the hazard(s) below.</i>											
9	Oxygen Deficient (O ₂ below 19.5%):			Oxygen Enriched (O ₂ above 23.5%):			Explosive Gas/Vapor:					
10	Hydrogen Sulfide (H ₂ S):			Carbon Monoxide (CO):			Chlorine (Cl ₂):					
11	Other (specify):											
Section D: Engulfment Hazards								Yes	No			
12	Does the space have the potential to engulf or suffocate the entrant? <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? <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? <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/ 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 effective in rescuing the entrant?													
29	Does the space have an internal configuration where non-entry rescue equipment (e.g., tripod and winch) may be ineffective 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 ineffective in rescuing the entrant?													
Section J: Determination											Yes	No		
31	Is the space a Permit-Required Confined Space? <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 prior to entry .														