**CONFINED SPACE ENTRY PERMIT**
University of Kansas

### GENERAL INFORMATION

Space to be Entered: ____________

Location / Building: ____________

### ENTRY PROCEDURE

- **Non-Permit Entry**
  - Sign At: ____________

- **Alternate Entry**
  - Sign At: ____________

- **Permit Required**
  - Sign At: ____________

### PRE-ENTRY PRECAUTIONS

- Eliminate any unsafe conditions before opening access door
- Guard entrance with barrier and/or signs
- Notify affected units of service interruption
- Lock-out/tag-out all sources of energy posing risk
- Install blank in affected lines
- Clean and/or purge any chemicals from storage vessel
- Wear proper personal/respiratory protective equipment
- Have lights or ladder available
- Coordinate with adjacent contractors if applicable
- Have appropriate MSDS’s available onsite
- Non-entry rescue equipment in place
- Establish Air Monitoring Schedule
  - Initial: ____________
  - Periodic: ____________ minutes
- Determine communication method between entrant and attendant
  - Voice (only if entrant is within sight)
  - Radio

### HAZARD ASSESSMENT

**REAL OR POTENTIAL ATMOSPHERIC HAZARDS**

- **YES**
  - Oxygen Deficiency (<19.5%)
  - Oxygen Enriched (>23.5%)
  - Flammable/Combustible Atmosphere (>10% LEL)
  - Carbon Monoxide (>25 ppm)
  - Hydrogen Sulfide (>10 ppm)
  - Other Toxics (specify) ____________

- **NO**

**OBSERVABLE SERIOUS SAFETY/HEALTH HAZARDS**

- **YES**
  - Mechanical ____________
  - Electrical ____________
  - Engulfment / Entrapment ____________
  - Burn ____________
  - Slip, Trip, Fall ____________
  - Heat Stress ____________

- **NO**

### COMMENTS

Please identify any problems encountered during entry into this space:

__________________________

__________________________

__________________________

After completion of entry, return this permit to shop supervisor
Shop Supervisor is to maintain this copy in shop files and
forward a photocopy to:

KU Dept. of Environment, Health & Safety
140 Burt Hall

### EQUIPMENT INVENTORY

- Ventilating Fan
- Barrier / Warning Signs
- Gas Monitor: ID# ________
- Phone / Radio
- 2 way communication w/entrant
- Non-entry rescue equipment
- Other ____________

- Gloves
- Hard Hat
- Respirator
- Safety Glasses
- Protective Clothing
- Ladder
- Lighting

### FOR PERMIT-REQUIRED PROCEDURE

**Assign Roles & Responsibilities:**

<table>
<thead>
<tr>
<th>Entrant</th>
<th>Attendant</th>
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<td>Name</td>
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| Voice (only if entrant is within sight) | Radio |

**SERVICE**

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<th>Contact method</th>
<th>Phone</th>
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**EMERGENCY RESCUE SERVICE**

**SIGNATURES**

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**ENTRY AUTHORIZATION**

I certify that all required precautions have been taken and necessary equipment is provided for safe entry and work in this confined space

<table>
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<th>Entry Supervisor Signature</th>
<th>Date</th>
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**ANNUAL REVIEW**

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