Hot Work Permit No. _______

ABC Biofuel Company

NO WORK IS ALLOWED EXCEPT THAT WHICH IS SHOWN ON THIS PERMIT

Date of Issue: ____________________________ Time Issued: ____________________________

Time Permit Expires: ____________________________

Equipment involved in Hot Work: _______________________________________________________

Description of Hot Work to be done:

Location: ________________________________ Department Doing Work: _______________

Personnel involved in Hot Work: _______________________________________________________

Yes No Initials

1. Has the equipment/line been thoroughly cleaned and purged?
   Cleaned by: ____________________________
   ____

2. Is equipment isolated and tagged? ____

3. Have electrical switches been locked out and tagged?
   ____

4. Are blinds in place?
   ____

5. Lock out / tag out in place?
   ____

6. Combustible gas meter reading in work area: ____________________________
    ____

7. Is work area thoroughly ventilated?
   ____

8. Fire Watch duty assignment: ____________________________
    ____

9. Are all sewers protected from falling sparks?
   ____

10. Are all combustibles in the work area protected from falling sparks?
    ____

11. Have combustible waste materials been removed from the area?
    ____

12. What fire protection is on hand at work site? (Type of fire extinguisher)
    ____________________________
    ____

13. What departments have been advised of Hot Work?
    ____________________________
    ____

14. Has the equipment/line been inspected to ensure all parts are free of hazardous materials?
    ____

15. List required PPE being used in work area.
    ____________________________
    ____________________________
    ____________________________
    ____

16. Has a joint inspection of the work site been conducted with Maintenance?
    Maintenance Personnel: ____________________________
    ____

WARNING: THIS HOT WORK PERMIT IS FOR ILLUSTRATION PURPOSES ONLY AND SHOULD NOT BE USED
Hot Work Permit No. _________

ABC Biofuel Company

NO WORK IS ALLOWED EXCEPT THAT WHICH IS SHOWN ON THIS PERMIT

Date of Issue: __________________________  Time Issued: _________________________
Time Permit Expires: _____________________
Equipment involved in Hot Work: _______________________________________________

Description of Hot Work to be done:

Location: ______________________________  Department Doing Work: _______________
Personnel involved in Hot Work: _______________________________________________

17. Do unit and atmospheric conditions permit safe work?  Yes  No  Initials
18. Is permit receiver aware of MSDS for materials previously contained in equipment/line?  
19. Are combustible gas tests required during the job progress?  
20. .......[Insert site/process specific questions here]
21. .......[Insert site/process specific questions here]

AGREEMENT: I HAVE CHECKED BOTH THE PERMIT AND THE WORK TO BE DONE. I UNDERSTAND THE NATURE AND EXTENT OF THE WORK. I UNDERSTAND THE PRECAUTIONS TO BE FOLLOWED IN COMPLETING THE WORK. I UNDERSTAND THE WORK IS NOT COMPLETED UNTIL OPERATIONS HAS SIGNED OFF ON COMPLETION OF THE WORK.

Permit Issued by:________________________ Job Title:__________________ Time:______
Permit received by:______________________ Job Title:__________________ Time:______

PERMIT WORK COMPLETED and Inspection of Work Completed:

Work Complete: ______________________   Job Title:__________________ Time:______
Permit Issuer: _________________________   Job Title:__________________ Time:______