

HAZARDOUS AREA WORK PERMIT

Name:		Permit Date:	
Specific Work Location:			
Proposed Start Time of Work:		Note: Permit cannot exceed one shift.	
Proposed Finish Time of Work:			
Hazardous Area Classification in Work Area			



SAMPLE

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Responsible Person:

Has this work been approved by the manager?

Yes

No

Equipment and Tools to be Used

Has equipment and tools approved for use in the hazardous area?

Yes

No

Work to be done

Does the work require electrical gas, oil, water or other type of substance?

Electricity

Gas

Oil

Water

Other

Yes

Does the location require approval?

Yes

No

Yes

Work to be done (cont.)

1	2	3
4	5	6
7	8	9

Is the person authorizing location isolated and controlled?

Yes

No

This document must be completed before work commences

Is the hazardous area verification dossier readily available to all persons required to enter and/or work in the hazardous area?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Workers hold relevant hazards areas certification or competencies	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Signage and barricades are in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>



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Customers who do other audits have been completed and are not to be used here

All persons conducting the audit have acknowledged that the following system is the Standard in Hazardous Areas (SHEA) version:

Combustion engines	1	1
Mobile phones, radios and hearing aids	1	1
Batteries for machinery, including welding machines	1	1
Computers, tablet devices or other mobile devices	1	1
Carburetors with automatic choke including fuel lines	1	1
Robot fumes and lights	1	1
Batteries connected to mains	1	1
Transfer cables and non-approved connectors other cables	1	1
Portable - mobile power sources and battery charger cables used for the hazardous area?	1	1
Low pressure cables require discharge lamps and heat	1	1
Apex and other synthetic clothing	1	1
Use electrical or instrumentation with equipment to create a spark	1	1
Other sources of static electricity	1	1
Do you intend to undertake Network in the Hazardous Area?	1	1

Note: Network requires additional controls and the completion of additional forms

Identify any other Safety or Environmental Concerns when Working in the Hazardous Zone
 (Attach additional information to the permit and complete a JHA or risk assessment, if required)

Hazard/Risk

Control Measure



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Get Persons Understanding the Work

Name	Company	Signature
Name	Company	Signature
Name	Company	Signature
Name	Company	Signature
Name	Company	Signature
Name	Company	Signature
Name	Company	Signature
Name	Company	Signature

Do persons doing work have a good understanding of the nature of the work/operation attempted?	Yes	No
Is every worker doing work aware of the person authorizing the work and is capable of the installation and maintenance of the work equipment in operation?	Yes	No

Monitoring the work

Has the manager responsible got nothing?	Yes	No
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Time of day	Hazardous tasks	Control Measures	Signs	Comments

Person Authorizing the Permit (This is Company's Representative and authorizes the Permit)



SAMPLE

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