

LOYALIST COLLEGE HOT WORK PERMIT & CHECKLIST
PART 1: HAZARD ASSESSMENT CHECKLIST

DATE:			
CHECKLIST COMPLETED BY:			
DESCRIPTION OF WORK TO BE PERFORMED – PROVIDE SPECIFIC LOCATION, BUILDING & ROOM #			
SAFETY CHECKLIST			
Check with Facilities Management Electrical for possible detectors that could be activated	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Fire extinguisher available and in good working order	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Available sprinklers and hose streams are in good working order	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Equipment inspected and in good repair	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Have operators been trained in procedures for hot work	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
At least TWO personnel present for duration of hot work	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Has the process for disabling fire alarm been followed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
REQUIREMENTS WITHIN 35 FT (11 m) RADIUS OF WORK SITE			
Flammable liquids, oily deposits, dust, lint and combustibles removed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Explosive atmosphere in area eliminated	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Floor swept and kept clean	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Combustible floors covered with fire resistant material	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Remove other combustibles where possible. Combustibles moved away from opposite side of wall/ceiling. Otherwise protect with fire resistant material or metal shield.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Blocked off cracks between floorboards, baseboards, walls and under door openings with fire resistant material	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Closed doors & windows	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
WORK ON WALLS OR CEILINGS			
Construction is non-combustible and without combustible covering or insulation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Combustibles on other side of walls moved away	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
WORK ON ENCLOSED EQUIPMENT			
Is Confined Space Entry Permit required	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Enclosed equipment cleaned of all combustibles	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Containers purged of flammable liquids/vapours	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Pressurized vessels, piping and equipment removed from service, isolated & vented	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
FIRE WATCH			
Fire watch to be provided during hot work and every 30 minutes thereafter for 3 hours, including coffee and lunch breaks	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Fire watch required for adjoining areas, above and/or below? If YES, please specify:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
OTHER HAZARDS / PRECAUTIONS TAKEN			

**LOYALIST COLLEGE HOT WORK PERMIT
PART 2: PERMIT**

This Hot Work Permit is required for any temporary operation involving open flames or producing heat and/or sparks. This includes but is not limited to: brazing, cutting, grinding, soldering, thawing pipe, torch applied roofing, and welding.

DISPLAY THIS PERMIT PROMINENTLY AT THE WORK SITE

This permit will authorize _____ of _____
(Name) (Company)

To perform: _____
(Describe activity)

Starting date: _____ End Date: _____

Building or Area: _____

Type of Hot Work: _____

SAFETY PRECAUTIONS

- Fire Safety / Facilities notified
- Fire extinguisher present
- Vessels, piping and equipment removed from service and purged or n/a
- Additional Safety Checklist on reverse side completed and understood

**IN CASE OF FIRE CALL 911
CAMPUS SECURITY EMERGENCY CALL 2222**

Permit issued by (signature):	
Employee performing work (signature):	
Designated Fire Watch (signature) – at completion of fire watch, 3 hrs	Time completed:
Comments:	