|  |
| --- |
| CAP Logo Color.png*Special Hot Work Permit*(*for* use outside of designated welding areas) |
| Date: | *Click here to enter a date.* | Contract # | *Click here to enter text.* |
| Entity performing work: | *Click here to enter text.* |
| Location: | *Click here to enter text.* |
| Confined Space Location:  | *Click here to enter text.* |
| C.S. Permit Number: | *Click here to enter text.* | C.S. Not applicable  |[ ]
| Type of Work |
| [ ]  Welding / Brazing | [ ]  Cutting | [ ] Grinding | [ ] Drilling | [ ]  Vegetation Burning | [ ]  Other (describe in comments) |
| [ ]  Cad Welding |  |  |  |  |  |
| Permit Conditions |
| Yes No N/A |  |
| [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  | [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]   | Fire Watch (minimum 30 minutes after completion of work)Emergency procedure trainingSprinkler system in serviceFlammable/combustibles a minimum distance of 35 feet from work areaAll non-moveable combustibles at least 30 feet away, floor/wall openings coveredArea tested for explosive atmosphereABC Fire extinguisher |
|  |  | Special precautions: | *Click here to enter text.* |
| Inspector authorization: | *Click here to enter text.* |
| Hot worker(s): | *Click here to enter text.* |
| Fire watch: | *Click here to enter text.* |
| Hot worker(s) sign off:  | *Click here to enter text.* |
| Time started:  | *Click here to enter text.* | Time finished: | *Click here to enter text.* |
| Fire watch(s) sign off: | *Click here to enter text.* |
| Time started:  | *Click here to enter text.* | Time finished: | *Click here to enter text.* |
| Comments: | *Click here to enter text.* |