**CONFINED SPACE ENTRY PERMIT**

**HS3F_001**

**THIS PERMIT MUST BE POSTED AT THE ENTRY PORTAL OR EQUALLY EFFECTIVE MEANS AND IS ONLY VALID FOR ONE SHIFT OR THE DURATION OF THE ENTRY TASK, WHICHEVER IS SHORTER.**

<table>
<thead>
<tr>
<th>Location/Building:</th>
<th>Date:</th>
<th>Time:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Space to be Entered:</td>
<td>Department/Zone Conducting Entry:</td>
<td></td>
</tr>
</tbody>
</table>

**Purpose of Entry:**
- [ ] Inspection Only
- [ ] Splicing
- [ ] Racking
- [ ] Cable Installation
- [ ] Valving
- [ ] Insulating
- [ ] Cleaning

- [ ] Other:

**PRE-ENTRY**

### 1. Pre-Entry Atmospheric Testing Log

<table>
<thead>
<tr>
<th>Gas Name</th>
<th>Test Result</th>
<th>Acceptable Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxygen (O2)</td>
<td>%</td>
<td>&gt; 19.5% - &lt; 23.5%</td>
</tr>
<tr>
<td>Lower Explosive Limit (LEL)</td>
<td>%</td>
<td>&lt; 10%</td>
</tr>
<tr>
<td>Carbon Monoxide (CO)</td>
<td>PPM</td>
<td>&lt; 25 PPM</td>
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<tr>
<td>Hydrogen Sulfide (H2S)</td>
<td>PPM</td>
<td>&lt; 1 PPM</td>
</tr>
</tbody>
</table>

- Other:

**2. Potential Hazards**

*Check All That Apply*

- Atmospheric/Chemical Hazards:
  - [ ] Combustible/Explosive Dust Fibers
  - [ ] Explosive/Flammable Gases or Vapors
  - [ ] Oxygen Deficient/Enriched
  - [ ] Toxic Fumes, Gases or Vapors
  - [ ] Respirable Dust (i.e. silica, asbestos)
  - [ ] Chemical Hazards:
    - [ ] acid
    - [ ] alkali
    - [ ] corrosive
    - [ ] unstable
    - [ ] oxidizer
    - [ ] radioactive
    - [ ] other:

- Physical Hazards:
  - [ ] Engulfment
  - [ ] Electric; Shock, Arc Flash/Blast
  - [ ] Fall (i.e. entry point guarding)
  - [ ] Temperature Extremes (Heat Index of ≤ 11˚F, ≥ 100˚F)
  - [ ] Internal Space Configuration:
    - [ ] Inwardly Converging Wall(s)
    - [ ] Stopped floor to smaller cross-section
  - [ ] Mechanical/Moving Equipment
  - [ ] Noise
  - [ ] Pressurized Piping, Valves or Vessels (i.e. hydraulic, steam, water)
  - [ ] Other:

### 3. Pre-Entry Planning

*Check All That Apply*

- [ ] The entry portal(s) and or surrounding area have been barricaded and/or guarded to prevent falls and unauthorized entry.

- [ ] The space’s atmospheric condition(s) requires purging and or continuous forced-air ventilation to ensure atmospheric hazards are within acceptable levels, **if so this space is prohibited from being reclassified.**

- [ ] Hazardous Energy Sources:
  - [ ] Electric
  - [ ] Gas
  - [ ] Hydraulic
  - [ ] Pressure; Air/Steam/Water/etc.
  - [ ] Residual/Stored energy
  - [ ] Other(s):

- [ ] Hazard Elimination and/or Control Method(s):
  - [ ] Barrier
  - [ ] Block/Blind Flange/Paddle Blind
  - [ ] Bleed/Drain
  - [ ] Physical Disconnection
  - [ ] Purge
  - [ ] Lock/Tag/Verify
  - [ ] Other(s):

- [ ] Hot Work will be performed in space. **Additional Requirements:**
  - [ ] Continuous Forced Air Ventilation
  - [ ] Hot Work Permit

- [ ] Affected employees, departments and/or contractors have been notified of service interruption, work scope and outage timeframe.

- [ ] Attendant/Entrant communication method for entry:
  - [ ] Visual
  - [ ] Voice
  - [ ] Radio/Cell
  - [ ] Other:

- [ ] Pre-entry briefing conducted prior to entry; on space specific hazards, their respective controls, employee’s responsibilities and the space entry procedures.

### 4. Required Equipment

- [ ] Gas Detection Meter
- [ ] Non-Entry Recue means (e.g. tripod, davit arm, rope lifeline w/ snap hook)
- [ ] Body Harness (Required for all entrants unless it creates an entanglement hazard)
- [ ] Forced Air Ventilation, must be utilized where there is likelihood of atmospheric hazards.
- [ ] PPE:

### 5. Other Equipment

- [ ] GFCI
- [ ] Lighting
- [ ] Portable Ladder
- [ ] Respiratory Protection
- [ ] Self-Retracting Lifeline
- [ ] Temporary Pedestrian/Traffic Control Device(s).
- [ ] Other:

### 6. Emergency and Rescue Planning

- [ ] Non-Entry Rescue; tripod, davit arm, rope lifeline w/ snap hook.

**Emergency Contact:**

- [ ] Off Ithaca Campus:
  - [ ] Ithaca Campus Emergency Services: 911 or 607-255-1111

*Prior to entry ensure attendant has effective means of summoning emergency services.*

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Form HS3F_001

Effective: 10/01/2016

Retention Description: Entry Supervisor to retain completed form(s) for one year. Upon request completed forms must be made available to EHS for annual program review.

Completed forms must be filed and maintained within the Entry Supervisor’s department office.
7. **Roster:** Circle each Authorized Attendant (A) and Entrant (E) assigned duty and legibly print their name. Each time an Entrant enters or exits the space, the Entrant must record their time of entry and then record their time of exit and initial.

All entrants and attendants have been trained and attend pre-entry briefing.

<table>
<thead>
<tr>
<th>#</th>
<th>Duty</th>
<th>Print A/E Name</th>
<th>Time In 1</th>
<th>Time Out 1</th>
<th>Time In 2</th>
<th>Time Out 2</th>
<th>Time In 3</th>
<th>Time Out 3</th>
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<tbody>
<tr>
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8. **Authorization by Entry Supervisor:** I have determined the confined space for which this document permits entry and have found all hazards associated with the space to be controlled, isolated and/or eliminated to allow safe entry. If the above statement is true the Entry Supervisor must, print, sign and record the time. If a determination of unacceptable conditions exists do not enter space and contact EHS 607-255-8200 for additional guidance.

**Authorization Time:**  
**Name:**  
**Signature:**

9. **Entry Atmospheric Testing:** Log readings at beginning and ending of entry and, at minimum of once per hour. Ensure atmospheric conditions are maintained at an acceptable level (AL) throughout the entry.

<table>
<thead>
<tr>
<th>Time</th>
<th>O2</th>
<th>LEL</th>
<th>CO</th>
<th>H2S</th>
<th>Other</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>AL: &lt; 19.5 - &gt; 23.5%</td>
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**POST-ENTRY**

10. **Permit Cancelation by Entry Supervisor:** Ensure all entrants exit the space, remove unnecessary equipment/material/tooling from space, and secure space’s entryway portal. If the work task is complete remove all hazard isolation/elimination controls, ensure space is ready for safe start up, return space to normal operations and communicate completion to affected personnel.

**Cancelation Date:**  
**Time:**  
**Signature:**

11. **Post-Entry Notes:** Note any problems or unusual events that occurred during the entry for annual permit and program review.