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| **Inspection Check List for Confined Space** |
| Date & time of Inspection: Location of Inspection: |
| Inspected by (Name of Safety Personal): Name of Execution Person: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sr.**  **No.** | **Check points** | **Yes/**  **No** | **Corrective Action Required** | **Action By** | **Due Date** | **Status** |
| 1 | Is the PTW valid, correctly filled and signed in all its parts together with JSA? |  |  |  |  |  |
| 2 | Is the oxygen level higher than 19.5% or less than 22.0%? |  |  |  |  |  |
| 3 | Are the results of the daily atmosphere test available? |  |  |  |  |  |
| 4 | Is the area free of combustible and flammable materials? |  |  |  |  |  |
| 5 | Is a trained stand-by watchman (attendant) available outside the confined space? |  |  |  |  |  |
| 6 | Is Visual, voice, or signal live communication maintained between confined space occupancy and the standby watchman? |  |  |  |  |  |
| 7 | Are people aware of established emergency response procedures? |  |  |  |  |  |
| 8 | Are PPE available as per PTW? |  |  |  |  |  |
| 9 | Is confined space occupancy wearing appropriate PPE’s? |  |  |  |  |  |
| 10 | Is a log-book maintained at the entrance of the confined space? |  |  |  |  |  |
| 11 | Is ventilation system working? |  |  |  |  |  |
| 12 | Are power cables to be disconnected? |  |  |  |  |  |
| 13 | Are warning notices required in place? |  |  |  |  |  |
| 14 | In case of Painting, Welding, Drilling, or Sludge removal:  Is the gas testing performed on a continuous basis throughout the time of the entry? |  |  |  |  |  |
| 15 | In case of vertical entry:  Are remote probes been used to measure the atmosphere at various level? |  |  |  |  |  |
| 16 | Is rescue plan attached in the permit? |  |  |  |  |  |

Checked By ……………………………………………………………… …Date……………………………………

Signature

HSE Officer Superintendent /Foreman