Ship: Date:

ID & location of enclosed space: Reason for entry:

Officer responsible for entry: ☐Staff Captain ☐Staff Engineer ☐Other: .....................

Entry Team Leader:

1. Permit validity

### From [time/date]: To [time/date]:

**Caution:** The permit validity shall not exceed the duration of the work shift i.e. max 12 hours

1. Pre-entry preparations

The Officer responsible for the entry completes these checks:

|  |  |  |  |
| --- | --- | --- | --- |
| **✔** | | | Remarks |
| 1. Lids removed⬜ | | | At [time]: |
| 1. **Hazards** and potential for presence of oxygen-deficient, oxygen-enriched, flammable or toxic atmosphere identified and: 2. Risk to health/ life determined minimal⬜ 3. Risk to health/ life determined not immediate but risk may arise⬜ 4. Risk to health/ life identified⬜   **Note:** If a) or b) above, follow sections II and III of this permit. If c) above, follow sections II, III and IV | | |  |
| 1. Other Permits to Work issued⬜   Hot Work ⬜ Aloft / Overside ⬜ Energy Isolation ⬜ | | |  |
| 1. **Risk Assessment** (Shipsure reference:\_\_\_\_\_\_\_\_) performed/ reviewed⬜   Risk Assessment updated: Y⬜ N⬜  **Note:** A Competent Person (i.e. Safety Officer) shall perform RA or review an existing one together with you, the Entry Team leader, the Attendant and all Entry Team members   1. Control measures confirmed and assigned as extra precautions below⬜ | | |  |
| 1. Space thoroughly vented (where possible by mechanical means)⬜   **Caution:** Do not use compressed oxygen | | |  |
| 1. Space adequately segregated from connecting pipe lines, valves and electrical power/equipment done⬜ | | |  |
| 1. Space cleaned where necessary⬜ | | |  |
| 1. Atmosphere testing equipment checked &calibrated⬜ | | |  |
| 1. Space atmosphere tested and found safe for entry⬜   **Note:** Stop ventilation for about 10 minutes before the pre-entry atmosphere test and take samples from several levels and through as many openings as possible  **Caution:** If possible, perform testing by remote means. If not possible, execute the entry for testing in accordance with the additional precautions in section IV | | |  |
| O2 | min 20.8% Vol\* ⬜  \*or per any national/flag requirements | Value: | Test readings taken by:  at[time]: |
| Flammable | Max 1% LFL ⬜ | Value: |
| Toxic | Max 50%OEL\* ⬜  \* incl. PEL, MAC, TLV or any other internationally recognized term | Value: ppm |
| 1. Arrangements for regular and frequent atmosphere checks during entry and after work breaks in place⬜   **Note:** Recommended 10 minutes, unless other interval is established in the Risk Assessment. Records shall be kept in section VII | | |  |
| 1. Continuous ventilation during entry and breaks arranged⬜ | | |  |
| 1. Adequate illumination and access provided⬜ | | |  |
| 1. Approved personal protective equipment (including protective clothing) & other equipment available, inspected and in good working condition⬜ | | |  |
| 1. Rescue and resuscitation equipment available for immediate use at the point of entry verified⬜ 2. Medical team advised &in state of immediate readiness⬜   **Note:** The equipment shall include stretcher, BA sets with fully charged spare cylinders, safety harnesses /lifelines, torch/flashlights (intrinsically safe) and, if required by the Risk Assessment, means for hoisting an incapacitated person and first aid kit | | |  |
| 1. An attendant constantly on standby at the point of entry to record who is in the space, maintain communication and initiate emergency procedure in case of an incident arranged ⬜ | | |  |
| 1. Officers on the Bridge & ER watch advised of the planned entry⬜ | | |  |
| 1. Communications between all parties agreed &tested⬜ | | |  |
| 1. PTW, emergency &evacuation procedures discussed, established &understood ⬜ | | |  |
| Extra precautions (where assigned per the Risk Assessment): | | | |

1. Pre-entry checks

The Entry Team leader completes these checks for each person entering:

|  |  |
| --- | --- |
| **✔** | Remarks |
| 1. Each person entering: 2. has received instructions or permission from the Officer responsible for the entry verified⬜ 3. is aware that the space must be vacated immediately in the event of ventilation failure or if the atmosphere changes from agreed criteria verified⬜ |  |
| 1. Pre-entry preparations satisfactorily and fully completed ⬜ |  |
| 1. Communication procedures agreed⬜ |  |
| 1. A reporting interval of \_\_\_\_\_\_minutes agreed⬜ |  |
| 1. Emergency &evacuation procedures agreed &understood⬜ |  |
| Extra precautions (where assigned per the Risk Assessment): | |

1. Additional precautions in case the atmosphere is known or suspected to be unsafe (incl. force majeure entry)

The Officer responsible for the entry completes these checks:

|  |  |
| --- | --- |
| **✔** | Remarks |
| 1. The entry is necessary for further testing , essential operation, safety of life or safety of the ship confirmed⬜ |  |
| 1. The number of persons entering is the minimum compatible with the work to be performed confirmed ⬜ |  |
| 1. Self-Contained Breathing Apparatus available for all &tested⬜   **Note:** Gauge and air capacity supply, low pressure audible alarm, face mask under positive pressure and not leaking   1. All personnel familiar with their use⬜ |  |
| 1. Persons entering are provided with calibrated and tested multi-gas detectors for oxygen, CO and other gases (\_\_\_\_\_\_\_\_\_), as appropriate verified⬜ |  |
| 1. Rescue harnesses are worn by all and lifelines are used verified⬜   **Caution:** Do not use lifelines, if it’s impractical |  |
| 1. No sources of ignition (unless inapplicable) verified⬜ |  |
| Extra precautions (where assigned per the Risk Assessment): | |

1. Authorisation and Approval

The Officer responsible for the entry completes these checks:

|  |  |  |
| --- | --- | --- |
| **✔** | | |
| 1. Hazards, Risks and this PTW discussed in a Tool Box Talk (TBT) with all involved done⬜ | | |
| 1. In the circumstances noted above it is considered safe to proceed with this work confirmed⬜ | | |
| **Signature:** | **Name/ Rank:** | **Role:** |
|  |  | Officer Responsible for the Entry |
|  |  | Entry Team Leader |
|  |  | Attendant |
|  |  | Person Entering |
|  |  | Person Entering |
|  |  | Person Entering |
|  |  | Person Entering |
|  |  | Person Entering |
|  |  | Ship’s Safety Officer |
|  |  | Master/ Staff Captain/ Ch. Engineer |

1. Upon completion of work

The Officer responsible for the entry completes these checks:

|  |  |  |  |
| --- | --- | --- | --- |
| **✔** | | | Date/ Time |
| 1. Entry completed and all persons, equipment and materials withdrawn⬜ | | |  |
| 1. Space secured against entry/lids closed ⬜ | | |  |
| 1. Bridge and ECR officers on watch informed⬜ | | |  |
| **Signature:** | **Name/ Rank:** | **Role:** | |
|  |  | Officer Responsible For Entry | |
|  |  | Entry Team Leader | |

**Note:** Original: To Safety Officer for filing Copy: To the point of entry

1. Record of Periodical Atmosphere Testing during entry

|  |  |  |
| --- | --- | --- |
| Atmosphere Requirements | | |
| Oxygen  >20.8%\*  \*or per any national/flag requirements | Flammable  < 1%LFL | Toxic Gas (CO and H2S as minimum)  <50% OEL\*  \* incl. PEL, MAC, TLV or any other internationally recognized term |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Time:** | **Activity:** | **%O2** | **%LFL** | **Toxic Gas\***  \*CO and H2S as min | **Initial:** |
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