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|--|--|-----------------------------------|--|
|  <div> Bagmane Developers Pvt. Ltd. Integrated Management System Electrical Work Permit </div> | | Document Number: BDPL OCP 03 F-02 | |
| | | Revision Date: January 16, 2024 | |
| | | Rev. No.: 03 | |

| Building Name | Permit No. | JSA No. | TBT No. | Permit Validity | | |
|---------------|------------|---------|---------|-----------------|-------------|-----------|
| | | | | Date: | From (hrs): | To (hrs): |

Job Location:

Equipment/System:

| | |
|--|---|
| Description of work to be carried out: | Reference of other Work Permit Nos. & Type: |
| | |
| Tools / Machines Used: | |

| Vendor Details | | Worker Details | | | |
|-----------------|-------------------------|----------------|-------------|------|-------------|
| Company Name: | | Name | Contact No. | Name | Contact No. |
| | | | | | |
| Contact Name: | | | | | |
| Contact Number: | No. of Workers: | | | | |
| LOTOTO Details | | | | | |
| No.: | Applied by Name & Sign: | | | | |
| Time: | | | | | |

Bagmane Emergency Contact Details (Name & No.):

Hazards involved and precautions taken in the course of work

| | | |
|---|--------------------------|-------------------------------------|
| Electrical Shock / Power cables at vicinity | Falling objects | Trip, Slip & Fall |
| Fragile/Sloppy Work Platform | Excess Dust & Fumes | Manual Handling |
| Awkward Posture | Protruding Sharp objects | Vibration & Noise |
| Damage to concealed services | Damaged access equipment | Conflicting simultaneous activities |
| Extreme weather conditions | Others, if any: | |

| | | | | | |
|----------------|---------------|-------------------------|------------------------|--------------------|-------------------------------|
| PPE's Required | Safety Helmet | Safety Goggles | Ear Muff/Ear Plugs | Safety Face Shield | Electrical Safety Hand Gloves |
| | Masks | Electrical Safety Shoes | Electrical Safety Mats | Others: | |

| | | | |
|-------------------------|-------------------------------|--|----------------------|
| Precautions to be taken | Availability of discharge rod | Availability of valid electrical license | HIRA/JSA carried out |
| | Others, If any: | | |

| Approvals (Signature) | | | | |
|-----------------------|-----------|--------------------|--------------------|----------------|
| Issuer: | Receiver: | Security Incharge: | Work Monitored by: | Authorized by: |
| | | | | |

| Special Approvals (Signature) (In case of extension / Off Duty hours) | | | |
|---|---------|--------------------|--------------|
| Approved by: | Reason: | Extended Validity: | |
| | | Date: | Time (From): |
| | | | Time (To): |

(The contents in the work permit is explained & understood by receiver & the same is acknowledged)

| | | |
|--|------------------|----------------|
| Delegation of Roles & Responsibilities | Work Monitoring: | Authorization: |
| | | |

| | | | | |
|-------------------------|-----------------|--|--|--|
| Work Inspection Details | Checked By Name | | | |
| | Time: | | | |
| | Sign: | | | |

| Permit Closure | | | | |
|-----------------|--------------|--------------------|-------------------|------------------|
| Work completed: | LOTO Removed | Incident/Accidents | Work Area cleared | Permit Cancelled |
| | | | | |

| | | | |
|----------------------|------|--------------------|----------|
| LOTO Removed Details | No.: | Removed by (Sign): | Remarks: |
| | | | |

| | |
|----------------------|--------------------------|
| Permit Cancelled by: | Reason for Cancellation: |
| | |

| | | |
|---------------------------------|---------------------|-------------------|
| Activity Completed Date & Time: | Permit Returned By: | Permit Closed by: |
| | | |

NOTE-1: In case of emergency, extreme weather or non-adherence to requirement, work permit will be cancelled by Issuer/ Authorized Person. To resume the work, fresh work permit has to be taken. **NOTE-2:** Please ensure all Signatures are with Name, Date & Time. **NOTE-3:** Y-Yes, N-No, NA-Not Applicable