

 BAGMANE		Bagmane Developers Pvt. Ltd. Integrated Management System Lifting and Hoisting Work Permit				Document Number: BDPL OCP 03 F-07	
		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							
Damaged access equipment		Damaged Tools & Tackles		Trip, Slip & Fall		Awkward Posture	
Fragile/Sloppy Work Platform		Excess Dust & Fumes		Manual Handling		Falling objects	
Safety Systems bypassed or disabled		Protruding Sharp objects		Vibration & Noise		Moving Machinery	
Extreme weather conditions		Electrical Shock / Power cables at vicinity		Conflicting simultaneous activities			

Others, if any:

PPE's Required	Safety Helmet		Safety Goggles		Ear Muff/Ear Plugs		Safety Face Shield		Safety Hand Gloves	
	Masks		Safety Shoes		Full body Harness		Fall Arrestors		Others:	

Precautions to be taken	Operator & Rigger License	Isolation	Safety Signages	HIRA/JSA	
	Adjacent Work Areas	Equipment inspection	Lifting Equipment Checklist	Medical checkup	
	Certificates	Lifting tools & tackles	Full body harness	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:
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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:
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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. **NOTE-4:** This permit is applicable for all lifting & hoisting works which is carried using crane, fork lifts & other lifting equipments.