Sherwin-Williams, Performance Coatings Group Bangalore, India

Work Permit

Permit No:6

1. Validity From: 11/01/2019 09:33:59 Validity To: 11/01/2019 18:00:00

Exact Location: testm
 Contractor's Name: Too

3. Contractor's Name: Test Equipment/Area: Testing Purpose

4. Description:

5. Type of Work: HeightFragileroof, LineBreaking, others

6. Personal Protective Equipment:

	Helmet	Splash Goggles		Ear plugs / Muff		Cotton hand gloves			
	Nitrile hand gloves	Heat resistant hand gloves		□ Electrical Gloves		Dust Mask			
	Solvent Mask	Face Shield		Full Body Harness		Lifeline With Ratchet			
	Gum Boot	Shoes With Non Conductive Sole		Respiratory Protection (Circle type) SCBA/Supplied Air/Air Purifying Cartridge Type		Chemical Protective Clothing			
	Coveralls	Rescue Equipment		Tripod Hoist		Wristlets			
	Scaffolding	Fall Arrester		Safety Belt		Ladder Condition			
\square	ESD/Regular	Others: mkbfdddddddddddddddddddddddddddddddddddd							

7. Fire Watch: NotRequired Fire Watch Name: Not Applicable

8 RiskAssessment: Required

9. Declaration:

I have noted the hazards associated with the work and I do accept to follow all the safety precautions told to be taken

I shall neither use any damaged tools & tackles nor tamper the same while carrying out the job.

I shall report all near-miss / incidents / accidents / unsafe acts & conditions, if any.

I shall stop the work immediately if it seems unsafe.

Permit Holder's Signature: asfsdsf

No of Person at site: 23

10. Approval:

Permit Issuer	Person seeking from non routine work	Monitpro Engineer
	Applicable if adjacent area owner is different from the permit issuer	N/A
Permit Approver	Person in the Approved List	approver monitpro

11. Extension of Work Permit:

DateTime From: DateTime To:

Permit Issuer	seeking for non-routine work – Area Owner/ Maintenance/ Projects	
Adjacent Area Owner	Applicable if adjacent area owner is different from the permit issuer	
Permit Approver	Person in the Approved List	

12. Work Permit Closure:

I certify that the site is clean and safe for operation

Permit Holder's Signature: Accepted By Area Owner:

DateTime: DateTime:

13. Contractor Rating:

Red/Yellow/Green/_____

Note: 1. This permit has to be displayed at the site of work.

- 2. On hearing emergency siren, stop work in safe condition and assemble at assembly point as per announcement.
 - 3. Please return back the original copy of work permit form to EHS dept. after closure of the work permit.
 - 4. Refer checklist for Electrical, Hot work, Excavation, Confined space entry, Height Fragile roof, Unloading Chemicals, Line Breaking, LOTO.

Sherwin-Williams Performance Coatings Group Bangalore, India		Work Permit-Ann (Contractor Safe Work)		Permit No:6			
S.No		DESCRIPTION	YES	NO	N/A	SIGN	
	OPE OF HAZARDS		,				
1	Ergonomics:force,postu	ure,repetition.Manual handling can it be al aid?					
2	Slip/trip/fall Hazards (Sp	pills,housekeeping,ice etc.)					
3	High movement areas (Vechicles or people)					
4	Contact with a sharp ed	ge,point, or blade?					
5	Loss of containment/Sp						
6	Required?)	s,flammable vapors,fuels.(HotWork Permit					
7	communication, labeling						
8	objects?(LOTO/Alternat	nergy,moving parts, or falling or flying e Procedure Required?)					
9	Procedure/Electrical Pe						
10	Unsafe or restricted acc						
11	Required?)	from heights(Elevated Work Permit					
	Required?) 12 Potential to be crushed						
13	Potential to be crushed Loud Noise Confined Space. (Confined Space Permit Required?)						
14	Confined Space. (Confined Space Permit Required?) Other(Explain)						
15	Other(Explain)						
15.PRI	EVENTIVE CONTROLS						
1	Inspection of equipment/area						
2	Safety watch or fire water						
3	Fire extinguishers/prote	•					
4	Spill control/containmen	<u>t</u>					
5	Air monitoring						
6	Work instructions create						
7	Fall protection(give deta	uls):					
8	Proper lighting	P 41 6 H 1					
9	Housekeeping/Remove	• • • • • • • • • • • • • • • • • • • •					
10	· · · · · · · · · · · · · · · · · · ·	um hoist,crane,powered industrial truck)				_	
11	Neutral body positioning	•				_	
12	Physical barriers/Guard Worker communication	ing or equipment				_	
13 14	Other Controls						
	UER/ USER CLEARANG	CE(plant supervisor)					
1		ous materials removed in working area					
2		plated form process/process lines/utilities.					
3		econtaminated as per cleaning procedure.					
4		area cordoned off & barricading ensured.				_	
5		ensure spill kit/ emergency safety gadgets.				_	
6	Valid Form 32 :Validity: Crane Reg No:						
7	Height of lifting & loweri						
8	Spark Arrestor Code No						
9		ed checked for both manual/vehicular.					
10	Any other class of Work	• •					
11	Proper PPE has been s						
12	Work process Area barr	icaded.					

Sherwin-Williams				Line Breaking Checklist In Case of Emergency Call: Permit N										it No:6			
INS Con	TRUCTIONS:This	Permit on with	MUS a LO	ST BE S TO Per	IGN mit t	ED A	ND POS	STE	ED by	each li	ine befor	e an	y Line-B oids)	reakii	ng a	activity be	gins.
Line	Location:		l	Line Na	me:					Line ID) #						
Auth	norized Person(S)																
List	Task To Be Com	pleted/D	escri	ption of	Wo	rk to b	e Perfo	orm	ed:					•			
	Inspection			R	epa	ir				Cle	eaning			7	C	Other	
1.	· ·			I					1—					_			
2.																	
3.																	
0.						ŀ	Hazard	l Ir	nform	ation							
Last Line	Material in the									leaning Ised:	g Materia	al					
MSI	OS Reviewed		Yes					No	N	//SDS Reviewed		t		Yes			No
Mat	erial racteristics:		Flam	mable/	Com	bustik	ole		С	Corrosive						Гохіс	
Onic	racionatios.	l				Ha:	zard C	on	trol N	/letho	de						
S.N	o Checks to be Supervisor	carried	out	by Sec	urity			-	'es	No	Site ve	rifica	ation	I	Ren	narks	
1	Line has been	Cleane	d														
2	Line has been			ed .													
3	Line has been				ints												
4	Line has been			•	<i>,</i> ,,,,,,												
5	Line has been and bled				ed/dc	uble	blocked										
6	Confined Space	e Entry	Perm	nit Con	nolet	ed											
7	Lockout/Tagou				.p.o.	<u> </u>											
8	Hot Work Perr			_													
9	Affected emplo		•		/isor	notifie	ed										
10	Barriers Place			•			-										
11	Pipe/Line brac	•															
12	Assessment o						ed										
13	Spill Control m																
14	Survey for igni																
15	Ground and bo	onding e	quipr	ment av	/ailal	ole.											
16								_									
	Require	d Prote	ective	e Faui	nme	- ent-ir	ndicate	d b	by ch	L neckin	a and I	istin	a reau	ired (ear	uipment	
	Work Gloves	<u> </u>	<i>,</i>	-	List	Catric		<u>, u. </u>	<i>y</i> 0.		ganan					_	
	Work Coveral	Type:						ement									
		Type:															
	☐ Chemical Protective Gloves: ☐ Chemical Pro						Pro	otecti	ective Clothing: Toxic Gas				Gas	Monitor			
	List Type					List Type						List Type					
□ List									□ List								

Notes / Any Problems must be Encountered Must Be Documented

She	rwin-Williams	Permit for working at height / frage excavation checklist In Case of Emergency Call:	oof/ P	Permit No:6			
S.No.		JOB	YES/ NA	Site Verificatio	Remarks n		
1	Equipment/Pipeline D	Pepressurized/Drained Fully/Flushed with Water					
2	Under ground pipelin	es isolated					
3	Under ground cables	are verified and de-energized					
4	Soil more than 1.2 m	(4feet) deep shall be securely shored					
5	Excavated material s of the trench.	hall be kept at least 0.61m (2 feet) away from the edge					
6	Atmospheres in the e employees enter excontent is%	excavation shall be tested for Oxygen content before exactions greater than 1.22 m (4 feet) in depth. Oxygen					
7	Checked the conditio structure	n of the safety belt and anchoring of lifeline to rigid					
8	Checked provisions horizontal movement	of lifelines with fall arresting for both vertical and in the absence of fixed means of access.					
9	Area barricaded / ca	ution boards provided					
10	The work area is clea	r and safe from overhead electrical lines					
11	Ensured safety net is						
12	Checked Preventive						
13	Organized pep talks						
14	Permanent safe mea	ns of access to work at height is available					
15	Special Precautions i	f any					