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|  | KOTHARI PETROCHEMICALS LIMITED PIB PLANT, MANALI, CHENNAI-600068. | WORK PERMIT NO: | 2 |
| EMERGENCY CONTACT NUMBERS: 200, 218,230 | OHC /MEDICAL CENTRE/AMBULANCE CALL:208,209 | JOB ID | dffgsdfg12 |

HOT WORK PERMIT

| | | | | |
|---|-----------------------------|---------------------|----------------------------------|-----------------------------------|
| 1 | VALIDITY FROM | 31/10/2020 14:15:48 | VALIDITY TO | 31/10/2020 18:00:00 |
| 2 | PERMIT ISSUER: | Karthiban M | PERMIT RECEIVER: | wqer |
| 3 | DESCRIPTION OF WORK | wedwqr | | |
| 4 | LOCATION OF THE WORK | erfew | EQUIPMENT NAME | P_1002A-C4 EFFULENT TRANSFER PUMP |
| 5 | WORK DONE BY | Department | DEPARTMENT | CPP |
| | NAME OF CONTRACTOR | monitpro | RISK ASSESSMENT REQUIRED? | No |

6 CHECK LIST: Following points should be checked before issuing the Work Permit with reference to the nature of job.

| | Done | Not Required | Check List | | Done | Not Required | Check List |
|----|------|--------------|---|----|------|--------------|--|
| 1 | | ✓ | Equipment Isolated | 2 | | ✓ | "Electrical Lockout, Tagout & Line clearance obtained" |
| 3 | | ✓ | Valve isolation | 4 | | ✓ | Double valve isolation |
| 5 | | ✓ | Drain/ Depressurize the equipment | 6 | | ✓ | Purge/Waterflush the equipment |
| 7 | | ✓ | "Sewer, manholes, etc. and hot surfaces nearby covered" | 8 | | ✓ | Verify mobile equipment inspected |
| 9 | | ✓ | Area cardoned off | 10 | | ✓ | Surrounding area checked & cleaned up of oil /rags/ grass etc. |
| 11 | | ✓ | Use Non sparking Tools | 12 | | ✓ | Slip plate / Blind provided |
| 13 | | ✓ | Display of Contractors work execution board at site | 14 | | ✓ | Proper lighting provided at work site. |
| 15 | | ✓ | Proper ventilation provided at work site. | 16 | | ✓ | Display of caution boards / tags provided |
| 17 | | ✓ | Safe means of access | 18 | | ✓ | Considered hazard from other routine / non-routine operations and concerned persons alerted. |
| 19 | | ✓ | Discussion of job related Hazards | 20 | | ✓ | Standby person provided for continuous supervision (Contractor / Process / Maintenance.) |
| 21 | | ✓ | Gas Tests: mention values in the table | | | | |
| | | | Work Specific Check List | | | | Work Specific Check List |
| 1 | ✓ | | Equipment / Work area checked | 2 | ✓ | | Considered hazard from other routine / non routine operations and concerned persons alerted |
| 3 | | ✓ | Firewater system checked for readiness | 4 | | ✓ | Firewater hose/ Portable extinguisher provided |
| 5 | | ✓ | Equipment Steamed /N2 purged | 6 | | ✓ | Equipment blinded / Disconnected / Closed / Isolated / wedged open |
| 7 | ✓ | | All Flammable materials removed | 8 | | ✓ | Proper means of Escape & Rescue available or provided |
| 9 | | ✓ | Checked spark arrestor on mobile equipment | 10 | | ✓ | Welding machine checked, earthed & located at safe location |
| 11 | | ✓ | Shield / booth against sparks provided | 12 | | ✓ | Earthing of the equipment verified |
| 13 | | ✓ | Oxygen / Acetylene cylinder kept outside Confined space (tank / Vessel / Column etc.) | 14 | | ✓ | ELCB provided on portable electrical equipment |
| 15 | | ✓ | Flash back arrestor provided on gas cutting set / Cylinders | 16 | | ✓ | Scaffolding, ladders and Platform checked and OK |

| | | | | | | | |
|-------------------------------------|---|--------------------------|---------------------------------------|--------------------------|---------------------------------|--------------------------|--------------------------|
| 7 | SPECIAL PROTECTION / PPE | | | | | | |
| <input checked="" type="checkbox"/> | Safety Helmet with Chin strip | <input type="checkbox"/> | Goggles | <input type="checkbox"/> | Safety Shoe | <input type="checkbox"/> | Gum boots |
| <input type="checkbox"/> | Gloves- Electrical | <input type="checkbox"/> | Gloves-PVC | <input type="checkbox"/> | Gloves- others | <input type="checkbox"/> | Gloves- (Heat resistant) |
| <input type="checkbox"/> | Dust Mask | <input type="checkbox"/> | ESD Shoe | <input type="checkbox"/> | Face shield | <input type="checkbox"/> | Welding suit |
| <input type="checkbox"/> | Apron/Boiler suit | <input type="checkbox"/> | PVC Suit/Chemical Protective Clothing | <input type="checkbox"/> | Full Body Harness (Safety Belt) | <input type="checkbox"/> | Lifeline |
| <input type="checkbox"/> | Fluorescent jacket | <input type="checkbox"/> | Fire Retardant suit | <input type="checkbox"/> | Ear plug/Ear Muff | <input type="checkbox"/> | Cartridge Mask |
| <input type="checkbox"/> | Self contained breathing apparatus (SCBA) | <input type="checkbox"/> | Online Breathing apparatus | <input type="checkbox"/> | Hood | <input type="checkbox"/> | Safety net |
| <input type="checkbox"/> | Barricades+ Warning signs | <input type="checkbox"/> | Others | | | | |
| Others:werwer | | | | | | | |

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|------------|---|--------------|-------------|------------------------|--------------------|-------------|------------------|------------------|
| 7.1 | GAS TEST RESULT: Suggested retesting frequency is everyHrs (use additional table, if required) | | | | | | | |
| No. | Values | %O2 | %LEL | Toxic Gas (PPM) | Other Gases | Name | Signature | Date Time |
| | Acceptable Values | 19.5 - 22.5% | Zero | Less than TLV | Less than TLV | | | |
| 1 | | | | | | | | |
| 2 | | | | | | | | |

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|----------|---|-------------------|----------------|------------------|------------------|
| 8 | PERMIT APPROVALS | Name | Remarks | Signature | Date Time |
| | I have checked the conditions in the field and the status is found as mentioned above. The job can be permitted. | | | | |
| | Permit Issuer | Karthiban M | | | |
| | Permit Approver(Shift In Charge) | Gokulavasan E | | | |
| | Stand by Person | Not Applicable | | | |
| | Safety officer | Karthiban M | | | |
| | Process Manager | Muruganantham RS | | | |
| | Electrical In charge* | Sivasubramanian Y | | | |
| | Mechanical In charge * | ramesh r | | | |
| | Instrumental In charge* | Vasanthanathan L | | | |
| | GM Operations * | Not Applicable | | | |
| | I have understood the above condition, arranged safety requirements, explained to the people concerned and received the permit for safe job execution. | | | | |
| | Engineer/Tech.of recipient dept/Receiver. | wqer | | | |

| | | | | | |
|----------|--|-------------|----------------|------------------|------------------|
| 9 | PERMIT CLOSURE | Name | Remarks | Signature | Date Time |
| | Certified that the subject work has been completed/ stopped and area cleaned. | | | | |
| | Job completed & Hand over by Receiver | | | | |
| | Job taken over & Permit closed by issuer | | | | |
| | Shift InCharge | | | | |

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| 10 | CONTRACTOR RATING |
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| <input type="checkbox"/> Red | <input type="checkbox"/> Yellow | <input type="checkbox"/> Green |
| Remarks (if Red and Yellow rating) : | | |

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|---------------------------------------|------------------------|------------------------------|--------------------------------|---------------------------------|-------------------------|--------------------------------|-------------------|-------------------------|--|
| 11 | RENEWAL OF WORK PERMIT | | | | | | | | |
| Day/ Date/Time | 1. LEL Level (ZERO) | Name & sign of Permit issuer | Name & sign of shift In charge | Name & sign of safety In charge | Name & sign of Stand by | Name & sign of Manager Process | Name & sign of GM | Name & sign of Receiver | |
| | 2. % O2(19.5 - 22.5 %) | | | | | | | | |
| First Extension Date:..... | 1. | | | | | | | | |
| | 2. | | | | | | | | |
| Second Extension Date:..... | 1. | | | | | | | | |
| | 2. | | | | | | | | |
| Third Extension Date:..... | 1. | | | | | | | | |
| | 2. | | | | | | | | |
| Fourth Extension Date:..... | 1. | | | | | | | | |
| | 2. | | | | | | | | |
| Fifth Extension Date:..... | 1. | | | | | | | | |
| | 2. | | | | | | | | |
| Sixth Extension Date:..... | 1. | | | | | | | | |
| | 2. | | | | | | | | |
| Seventh Extension Date:..... | 1. | | | | | | | | |
| | 2. | | | | | | | | |

**** Renewal of Hot work permit is allowed only if the work is carried out in Workshop**

| | GENERAL INSTRUCTIONS : |
|-----|---|
| 1. | In case of an Emergency or FIRE ALARM, all works must be stopped and permit stands cancelled. All personnel must leave work site and proceed to emergency Assembly points soon. |
| 2. | In case of any LPG/ Gas /Liquid release (or) abnormality noticed, stop work immediately and move to safe location till further instruction, |
| 3. | This permit must be available at work site all the time. On job closure (or) expiry, this permit must be returned to the permit issuer/Shift Incharge. |
| 4. | Do not commence the work without a valid work permit. |
| 5. | Acquaint yourself with job and its hazards and ensure the tools used are safe. |
| 6. | Inform regarding unsafe condition/unsafe act to operator/Safety incharge/Shift incharge |
| 7. | When in doubt, consult KPL employee of concerned department (or) KPL Operator |
| 8. | Work should be started within one hour after issue of this permit |
| 9. | All safety precautions should be meticulously followed. Keep access clear for emergency. |
| 10. | Incase of any emergency, permit should be surrendered to the issuing authority |
| 11. | Permit is valid only for the mentioned time. After that, further extension is needed before proceeding the job |
| 12. | Extention: To be extended only, if area and nature of work is same |
| 13. | Extention: Daily extension should be authorized per the concerned persons, after reviewing the site again. |
| 14. | Extention: If the job is discontinued, make a fresh permit |
| 15. | Extension: Extension can be done maximum one week duration. Make new permit every Monday. |

| | PERMIT SPECIFIC INSTRUCTIONS - Hot Work |
|----|--|
| 1. | Hot work includes spark, welding, gas cutting, hacksaw cutting, Hammering, burning, grinding, soldering, chipping, rivetting, shot blasting, drilling, camera flashing, power tools, IC Engine operations. |
| 2. | Incase of gas/liquid leak, all HOT work must be stopped immediately |
| 3. | For any hotwork inside the vessel, Confined Space permit should also be ensured |