Sherwin-Williams,	
Performance Coatings	Group
Bangalore India	•

Work Permit

Permit No:1

	9		· · · · · · · · · · · · · · · · · · ·									
			y From: 30/12/2		50	Validity To: 30/12/2018 18:00:00						
			Location: xcgvfc			_ :						
		Contractor's Name: RAKSHA BUILD TECH Equipment/Area: Pipe line										
4.	Description:											
	zxcvv											
5.	Typ	oe o	of Work: Hotwo	rk, LockOut	TagOut,							
	Personal Protective Equipment:											
		√	Helmet		Splash Goggles		Ear plugs / Muff		Cotton hand gloves			
			Nitrile hand glove	s 🗆	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			
	L		ESD/Regular		Others: dfgbfdg							
7.	Fir	e V	Vatch: NotRequ	ired	Fire Watch Name	: No	t Applicable					
8	Ris	kΑ	ssessment: No	tRequired								
9.			ration:									
					he work and I do accept to fo			to be ta	aken			
				-	ckles nor tamper the same widents / unsafe acts & condition							
			stop the work immedi				,					
	Pe	rmi	t Holder's Signati	ure: TEST								
	No	of F	Person at site: 23	}								
10	. Ap	pr	oval:									
	Г	Dar	rmit laguar	Darson oo	okina from non routing	u o el c	opprover.	manitr	240			
			rmit Issuer acent Area		eking from non routine virtualist in it is adjacent area owner.			approver monitpro Kalaimani Govindswamy				
	L	Οw	ner	the permit	issuér			Traidinani Covindowaniy				
	Permit Approver Person in the Approved List					Debmalya	Das	gupta				
11	. Ex	ten	sion of Work Pe	ermit:								
	DateTime From: DateTime To:											
			rmit Issuer	Maintenan	r non-routine work – Arc ce/ Projects							
		Ow	acent Area mer	the permit		erent from						
Permit Approver Person in the Approved List												
12	. Wc	ork	Permit Closure:									
	Ιc	erti	fy that the site is	clean and s	safe for operation							
Permit Holder's Signature: Acc						Acce	pted 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.

Perfor	win-Williams mance Coatings Group llore, India	Work Permit-Anne		Permit No:1		
S.No		DESCRIPTION	YES	NO	N/A	SIGN
A.ISS	UER/ USER CLEARANC	E(plant supervisor)				
1	All flammable & hazard	ous materials removed in working area				
2	Equipment has been iso	lated form process/process lines/utilities.				
3	Equipment cleaned & de	econtaminated as per cleaning procedure.				
4	Work permit clearance a	area cordoned off & barricading ensured.				
5	As a safety precaution e	nsure spill kit/ emergency safety gadgets.				
6	Valid Form 32 :Validity: Crane Reg No:					
7	Height of lifting & lowering	ng materials for a height of above 3 Meters				
8	Spark Arrestor Code No	:				
9	Material movement route					
10	Any other class of Work	Permit, specify:				
11	Proper PPE has been se	elected.				
12	Work process Area barri					

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Hot Work Permit Checklist In Case of Emergency Call:

Permit No:1

INSTRUCTIONS: Complete and display this permit in the Hot Work Area and maintain a copy in a secondary location during performance of the Hot Work activity. Review permit requirements/restrictions with all area and Hot Work employees. Workers shall wear required PPE for the project and know the location of nearest exits, fire extinguishers, fire alarm pull stations, safety showers, and eye wash fountains. Immediately stop work and inform a Supervisor if conditions change or if unsafe conditions/practices are observed during the performance of Hot Work. Upon completion, verify safe completion of Hot Work and retain permit for one year.

PRECA**Slag-	AUTIONS I	MPLEMENTED (* Hot) : (welding, torch cutting)	Work Area: the area w , grinding, brazing, an	vithin a 11 d solderin	meter (35	5-feet) radius of the	Hot Work activity
		ITORING VERIFICATION			Yes/NA	Site Verification	Remarks
1	Air monitorin	ng instrument calibration perio	od is current				
2	Air monitoring instrument sensor's zeroed in a clean atmosphere						
3	Air monitorir	ng instrument sensor's "bump"	" checked with test gas to e	ensure			
1	Flammable vapor check with air monitoring instrument for % LEL and % oxygen						
5		ear of spills, drips, and release	es				
<u> </u>	Wood floors	or platforms wetted or covere	ed				
,	Combustible	dusts/liquids swept and clea	ned from surfaces in HW A	rea			
3	Sprinkler he	ads shielded for protection					
)	Combustible or Shielded	e materials (bags, wood, etc.)	are either: Removed from	HW Area,			
0		ts marked and HW Area dem	arcated				
11	Operations i	nvolving open flammable/com	nbustible handling ceased				
12		s/restrictions discussed with p					
3		fire blankets/tarpaulins check					
S.NO		ODUCING ACTIVITIES			Yes/NA	Site Verification	Remarks
		ger authorization granted	•		T ES/INA	Site Verification	Remarks
<u>1 </u>		dentified and assigned					_
		t of spark/slag to immediate v	work area assured by: Engl	noina			
3	activity to co	ontain spark slag to immediate wontain spark / slag and Coveringsing / covering ducts / conve	ng / guarding floor / wall op eyors in area	enings in			
S.NO		RK (HW) AREA* PREP					
		ins, etc. checked with air mon		and sealed			
2	Approved fir	e extinguisher(s) present					
 3	Sprinkler sys	stem is operational (NA if not	present)				
<u>-</u> 4	Containers of flammable/combustible material are: Removed from HW Area						
5	Equipment with flammable/combustible materials are: Cleaned and purged, or Tightly sealed						
S.NO		ATION FOR WORK ON	I PIPING VESSELS	FTC			
<u>50</u> 1		and lines isolated/locked out	trii iito, vedeelo,				
2		s cleaned/free of chemicals					
<u>2</u> 3	· · ·	verified to be vapor-free with a	air monitoring instrument				
		peing worked upon vented	an monitoring matrament				
4	Equipment	being worked apon vented	E' \\/	I D-1-1	1 -		
			Fire Wate	n Detai	IS		
	tch Name :	/T: a)					
-ire wat	tch Coverage		Т	o			Sign
AM/PM		110111	AM/PM	<u> </u>			Olgii
AM/PM			AM/PM				
AM/PM			AM/PM				
AM/PM		<u> </u>	AM/PM				<u> </u>
			Security Wa	atch De	tails		
	Watch Nam						
Security	Watch Cove						
From To Sign							Sign
AM/PM AM/PM							
AM/PM AM/PM AM/PM AM/PM							
	pecial Instruct	tions: Monitor Hot Work Area		npleted		1	
			Periodic Air Monit	toring R	Recordin	gs	
	Time	0/ 0	Recorded			0/ 0	0/ 1 = 1
AM/PM	Time	% Oxygen	% LEL	Tin AM/PM	ie	% Oxygen	% LEL
AM/PM				AM/PM			
ΔM/DM				AM/DM			1

AM/PM

AM/PM

AM/PM

AM/PM

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LOCKOUT/TAGOUT PERMIT

Permit No:1

	In Case of	f Emergency Call	:						
Instructions: this permit MUST BE SIG	NED AND POSTED	before any serving	or maintena	nce of L	OTO Required				
machine/equipment/process.		Ti							
Date:		Location:							
Machine/Equipment:	t /T = t	Purpose Of Task:			le comple a me				
Instructions:Complete Sequence of Locko Procedure below or attach written proced document name/number	ure and list	Written Procedure D	ocument Na	me and r	Number:				
1. Notify and list affected employees that t	he machine /	Name		Name					
equipment must be shut down and locked servicing or maintenance	out to perform the	Name		Name					
2.Identify the type and magnitude of the	energy that the	Type of Energy	Magnitude		ControlMethod				
machine equipment utilizes and control th	e method								
3.Shut machine equipment/down by the n procedure(stop button close value), if the equipment is operating	ormal stopping machine or	Type of opertaing co	ontrols	Location	ns				
4.Deactivate the energy isolating device sor equipment is isolated from the energy	so that the machine sources	Energy Isolating Dev	vices	Locations					
5.Identify Authorised Employees who lock	cout and tag	Name/Signature		Name/Signature					
		Name/Signature		Name/Signature					
6.Release stored or residual energy		Types of stored ener	rgy	Methods to dessipate or destrain					
7.Check that no personnal are exposed		T							
8.Ensure that the machine equipment is of the energy sources	lisconnected from	Methods of Verifying	the isolation	of the e	quipment				
9.The machine or equipment is now lock	edout								
Permit Authorization:	·								
If the Lockout	t Must be Remov	ved For Testing C	<u> Position</u>	ning					
1.Clear machine/equipment of nonessent	ial items								
2.Check to make sure all employees are									
3.Remove the Lockout Devices.Each Aut	horised person must	only remove their ow	nlock						
4.Energise and proceed with testing and	<u>-</u>								
5.De-Energise the machine by following s		ıgh 9 above							
Written Procedure Document Name and I									
		to Equipment servic	e						
When the servicing or maintenance is co									
1.Remove the Lockout Devices.Each Authorised person must only remove their ownlock									
2.Energise and proceed with testing and		and O also							
3.De-Energise the machine by following s		ign 9 above							
4.Written Procedure Document Name and Permit Authorization:	Permit issuer's sign	ature	Designated Date and Ti	Employe me	e Signature				
Return the completed Permit to Retain permits for 1 year									