



**Dalmia Cement (B) Ltd - Ariyalur**  
Permit No : #MEC3



<b>Department :</b> MECHANICAL	<b>Section :</b> PACKING PLANT	<b>Start Date :</b> 28-11-2024 20:55 HRS	<b>End Date :</b> 29-11-2024 22:55 HRS	<b>Contractor:</b> ARIES APPLIANCES		
<b>A) To be filled by Permit Initiator :</b>			<b>Initiator Name &amp; Signature :</b> ABHAY DIWAKARRA 28-11-2024 20:56 HRS			
<input checked="" type="checkbox"/> Confined Space	<input checked="" type="checkbox"/> Electrical Work	<input checked="" type="checkbox"/> Excavation	<input checked="" type="checkbox"/> General/Cold work	<input checked="" type="checkbox"/> Hot Work	<input checked="" type="checkbox"/> Material Lowering & Lifting	
<input checked="" type="checkbox"/> Scaffolding Erection & Dismantling	<input checked="" type="checkbox"/> Work At Height					
<input checked="" type="checkbox"/> SOP			<input checked="" type="checkbox"/> Work instructions clearly explained to the all the members in the working Group - TTTTTTT			
<b>Work Description :</b> TETESTER			<b>Location :</b> TESTERTESTER			
<b>Checkpoints for Permit Initiator</b>			<b>Sub Contractor:</b> TESTER		<b>No of Workers:</b>	
<input checked="" type="checkbox"/> WPRA to be filled before starting the job at site	<input checked="" type="checkbox"/> PPEs and Tools are provided as per job requirement		<input checked="" type="checkbox"/> UH approval to be taken for taking <b>hot work</b> in Prohibited area		<input checked="" type="checkbox"/> TH approval to be taken for taking <b>height work</b> in Prohibited area	
<b>B) Issuer:</b> I have checked that all conditions are met to carry out the job safety.			<b>Name of the Issuer:</b> SANJAY SWAMI <b>Sign:</b> 29-11-2024 04:45 HRS			
<b>H)Renewal of Permit to Work</b>						
From Date	To Date	Initiator	Issuer	No.of Persons	Co-permitte	Reference Code

**PRECAUTIONS TAKEN AND EQUIPMENT PROVIDED TO PROTECT PERSONNEL FROM ACCIDENT OR INJURY.**

**Mandatory measures to be taken for all type of works:**

<input checked="" type="checkbox"/> Required usages of PPEs (Safety Helmet, Safety Shoes)	<input checked="" type="checkbox"/> Enclose the list of persons carried out the job.	<input checked="" type="checkbox"/> Five Minutes Safety Talk conducted (record to be maintained)	<input checked="" type="checkbox"/> Equipment/work area inspected.
<input checked="" type="checkbox"/> Equipment electrically isolated. If YES, line clearance Permit No:	<input checked="" type="checkbox"/> Portable Fire Fighting system readiness.	<input checked="" type="checkbox"/> Tools & Tackles Checked	<input checked="" type="checkbox"/> The place of work is made accessible and proper aggrass.
<input checked="" type="checkbox"/> Barricading and cordoning of the area.	<input checked="" type="checkbox"/> Loose dresses are to be avoided or tight properly while working near conveyors or rotating equipment's.		<input checked="" type="checkbox"/> Sufficient safe lighting facility provided.
<input checked="" type="checkbox"/> Deputed Skilled Supervisor		<b>Additional Info(If any):</b>	
<input checked="" type="checkbox"/> Safety shoes & Helmet, Eye protection <input checked="" type="checkbox"/> Leather Hand gloves <input checked="" type="checkbox"/> Leather Apron <input checked="" type="checkbox"/> Hand Gloves <input checked="" type="checkbox"/> Leg Guard <input checked="" type="checkbox"/> Welding Goggles for Helper <input checked="" type="checkbox"/> Nose Mask			



**Dalmia Cement (B) Ltd - Ariyalur**  
Permit No : #MEC3



**Work Completion**

**PA Work Cancellation**

Work Cancellation, all persons are withdrawn and material removed from the area

**Performing Authority:**

**IA Work Cancellation**

I have inspected the work area and declare the work for which the permit was issued has been properly.

**Issuing Authority:**