

# HOT WORKS PERMIT



PERMIT #:.....

**BEFORE INITIATING ANY HOT WORKS ENSURE PRECAUTIONS ARE IN PLACE.**

**❖ CAN THIS JOB BE AVOIDED? Y N or IS THERE A SAFER WAY? Y N**

This Hot Work Permit is required for any operations involving open flames or producing heat and / or sparks. This includes, but not limited to: Brazing, cutting, grinding, Soldering, Thawing pipe, torch – applied, roofing and welding

<p><b><u>INSTRUCTIONS</u></b></p> <p><b><u>Section A : University Contracts Administrator :</u></b></p> <p><b>Verify precaution list are correct (or do not proceed with the job /work) .</b></p> <p><b><u>HOT WORKS DONE BY:</u></b></p> <p><b>Employee Name:</b> .....</p> <p><b>Department:</b> .....</p> <p><b><u>Contractor</u></b></p> <p><b>(Company Name ) :</b>.....</p> <p><b>Employee Name: Ph #:</b>.....</p> <p><b>Date:</b> .....</p> <p><b>Location work carried out:</b>.....</p> <p>.....</p> <p><b>Scope of Work :</b>.....</p> <p>.....</p> <p><b>Required safety precaution have been done: Y N</b></p> <p><b>Specify:</b> .....</p> <p>.....</p> <p><b>B. Signature of Employee :</b> .....</p> <p>Permission is given to carry out this work, provided required precaution have been taken, site barricading installed and proper safety signs placed around.</p> <p><b>C. Sign (Name):</b>.....</p> <p><b><u>Permit Expires:</u></b></p> <p><b>Date :</b> ..... <b>Time :</b>.....</p>	<p><b><u>D : Check list : Place a tick (or cross)</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Fire extinguisher /hose reel readily available and in good working condition</li> <li><input type="checkbox"/> Training provided on how to use the fire equipment .</li> <li><input type="checkbox"/> Fire detectors isolated .</li> <li><input type="checkbox"/> Hot work equipment in good using /working condition.</li> <li><input type="checkbox"/> Relevant PPE worn / Available.</li> <li><input type="checkbox"/> Surround area free from flammable liquids, dust , oily deposit etc .</li> <li><input type="checkbox"/> Good / proper Ventilation.</li> <li><input type="checkbox"/> All gas fittings checked / safe to use .</li> </ul> <p><b><u>E : Fire watch:</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Fire watch provided during works being carried out ( till work carried out) :</li> </ul> <p><b>Name:</b> ..... <b>Time:</b>.....</p> <p><b>Duration:</b>.....</p> <p><b><u>F : After work</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Fire watch provided after works being carried out (24 hrs.):</li> </ul> <p>Person monitoring: .....</p> <p>Time:..... Duration:.....</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> The working area clean /tidy &amp; Barricades removed</li> <li><input type="checkbox"/> Security office advised</li> </ul> <p><b>Any resulting fire alarm or fire will be the responsibility of the Employee or Contactor carrying out the work.</b></p>
---	--

USP LAUCALA EMERGENCY NUMBERS: **USP SECURITY:** 9380035 **USP MEDICAL CENTER:** 32 32362 **E & I:** 3232440

NATIONAL EMERGENCY CONTACT NUMBERS: **FIRE / AMBULANCE:** 910 or 912 **EFL:** 913 **FIJI POLICE:** 917