**Confined Space in Construction – Sample Permit /Hazard Assessment/Certification Entry #:**

**Entry Type: Full Permit Confined Space [ ]  Alternate Entry Proc. [ ]  Reclassified [ ]  Explain:
Note: Permit is not required for entry if using alternate entry procedures or for reclassified spaces (See MIOSHA Part 35 for details).**

|  |  |
| --- | --- |
| **1. Permit space to be entered (i.e. sewer, tank, manhole, crawlspace, attic):**        | Host, GC and Subs notified of the work? Yes [ ]  NA[ ]  |
| **2. Purpose of entry:** | Location:       |
| **3. Date of entry:** | Auth. duration of entry permit:       | Entry supervisor print name/contact information: |
| **4. Rescue type selected:** Non-entry [ ]  or Entry [ ] Equipment: Tri-pod/Davit arm [ ]  or Emergency service [ ]  Emer. Service Available (Permit Space only): Onsite [ ]  or [ ]  Off-site (name & phone):      Rescuer(s) trained in 1st Aid/CPR (Permit Space only): [ ]  (Note: Part 1 1st Aid requirements |       |
| Communication Equipment : Radio [ ]  Voice [ ]  Cell Phone [ ]  Air Horn [ ]  Other [ ]  |
| **5. Authorized entrants (Print Names)** Use back or attach page for more entrants | **Entry time** | **Entry time** | **Entry time** | **Entry time** |
| **In** | **Out** | **In** | **Out** | **In** | **Out** | **In** | **Out** |
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| **6. Attendant (Print Name)** | **Date and Time**  | **7. Current training for confined space workers verified?** Yes **[ ]** No **[ ]**  |
|       |       AM [ ]  PM [ ]   |
|       |       AM [ ]  PM [ ]   |
| **8A. Identify, evaluate and record hazards of space to be entered.** | **Yes** | **No** | **8B. Specify equipment and measures required to eliminate/control hazards before and during entry**  |
| A. Lack of Oxygen or Inert Gas Present(i.e. Argon, Nitrogen) | **[ ]**  | **[ ]**  | Continuous forced air ventilation **[ ]** Blank, Block and Bleed **[ ]** Purge, Clean, Drain **[ ]** Intrinsicly Safe Lighting **[ ]** Respiratory Protection: Supplied Air with Escape Bottle [ ]  SCBA **[ ]** Other (list) [ ]        |
| B. Flammable Gas/Vapor (%LEL) | **[ ]**  | **[ ]**  |
| C. Toxic Gas/Vapor (i.e. CO and H2S) | **[ ]**  | **[ ]**  |
| D. Chemical (impairs self-rescue) | **[ ]**  | **[ ]**  |
| E. Electrical  | **[ ]**  | **[ ]**  | Lock out/Tagout **[ ]** Isolate/Guard **[ ]** Blank, Block and Bleed **[ ]** Other (list) [ ]        |
| F. Mechanical | **[ ]**  | **[ ]**  |
| G. Hydraulic/Pneumatic | **[ ]**  | **[ ]**  |
| H. Temp. Extreme  | **[ ]**  | **[ ]**  | Continuous forced air ventilation **[ ]** Ice Vest **[ ]** Other (list) [ ]        |
| I. Engulfment | **[ ]**  | **[ ]**  | Drain **[ ]** Pump **[ ]** Other (list) [ ]        |
| J. Entrapment/Converging Walls | **[ ]**  | **[ ]**  | Install Work Platform **[ ]** Hole Covers **[ ]** Guard Rails **[ ]**  Personal Fall Arrest /Restraint **[ ]** Other (list) [ ]        |
| K. Fall Hazard | **[ ]**  | **[ ]**  |
| L. Introduced Hazards (i.e. Chemical, Hot Work) | **[ ]**  | **[ ]**  | Fire extinquisher **[ ]** Hot Work Permit **[ ]** Other (list) [ ]        |
| M. Other  | **[ ]**  | **[ ]**  | Warning signs posted at access **[ ]** Additional PPE **[ ]**       |
| **9. Gas tester(s)/monitor model(s)/type(s):** | Serial/unit no(s):       |
| Bump test to confirm function? Yes [ ]  Verified: On-site test [ ]  Documentation [ ]  |
| **Test Required**  | **Permissible levels** | **Initial test levels** | **Subsequent test type**:Sample **[ ]**  Continuous **[ ]**   (take readings before **EACH** entry into space) |
| **(before vent)** | **Test 2** | **Test 3** | **Test 4** | **Test 5** | **Test 6** |
| A. Oxygen (O2) | 19.5 to 23.5% |       |       |       |       |       |       |
| B. Combustible gas/vapor (LEL) | 10% LEL |       |       |       |       |       |       |
| C. Hydrogen sulfide (H2S) | 5 PPM |       |       |       |       |       |       |
| D. Carbon monoxide (CO) | < 25 PPM |       |       |       |       |       |       |
| E. Other |  |       |       |       |       |       |       |
|  | **Tester initials** |       |       |       |       |       |       |
|  | **Test Times** |       |       |      |       |       |       |
| **10. Are entry conditions acceptable?** (Remove debris and other obstructions from entry point) Yes **[ ]**  No **[ ]**  |

 **Entry Suspended** **(time):**       AM [ ]  PM [ ]  **Time of reentry:**       AM [ ]  PM [ ]
 **Reason for suspending permit:**       **Permit Canceled date/time**      /      AM [ ]  PM [ ]   **Unanticipated Hazards?** No [ ]  Yes [ ]  If yes, describe below: **Debriefing occurred after entry?** Yes[ ]  No [ ]       **EntrySupervisor Signature:**
 *If permit was terminated due to abnormal or emergency conditions, document the conditions encountered and the steps taken to counteract*.
MIOSHA/CET-0224 (11/16)  Authority: P.A. 154 of 1974

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| --- | --- | --- | --- | --- |
| **5. Authorized entrants (continued from front) Print names** | **Entry time** | **Entry time** | **Entry time** | **Entry time** |
| **In** | **Out** | **In** | **Out** | **In** | **Out** | **In** | **Out** |
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**References and Additional Information**

**1926.1202 DEFINITIONS**

**Confined space** means a space that:

(1)Is large enough and so configured that an employee can bodily enter it;

(2)Has limited or restricted means for entry and exit; and

(3)Is not designed for continuous employee occupancy

**Permit-required confined space** (permit space) means a confined space that has one or more of the following characteristics:

(1)Contains or has a potential to contain a hazardous atmosphere;

(2)Contains a material that has the potential for engulfing an entrant;

(3)Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slopes downward and tapers to a smaller cross-section; or

(4)Contains any other recognized serious safety or health hazard

**Hazardous atmosphere** means an atmosphere that may expose employees to the risk of death, incapacitation, impairment of ability to self-rescue (that is, escape unaided from a permit space), injury, or acute illness from one or more of the following causes:

(1)Flammable gas, vapor, or mist in excess of 10 percent of its lower flammable limit (LFL);

(2)Airborne combustible dust at a concentration that meets or exceeds its LFL; Note to paragraph (2) of the definition of “Hazardous atmosphere”. This concentration may be approximated as a condition in which the combustible dust obscures vision at a distance of 5 feet (1.52 meters) or less.

(3)Atmospheric oxygen concentration below 19.5 percent or above 23.5 percent; (4)Atmospheric concentration of any substance for which a dose or a permissible exposure limit is published in subpart D of this part (Occupational Health and Environmental Control), or in subpart Z of this part (Toxic and Hazardous Substances), and which could result in employee exposure in excess of its dose or permissible exposure limit; Note to paragraph

(4) of the definition of “Hazardous atmosphere”. An atmospheric concentration of any substance that is not capable of causing death, incapacitation, impairment of ability to self-rescue, injury, or acute illness due to its health effects is not covered by this definition.

(5)Any other atmospheric condition that is immediately dangerous to life or health. Note to paragraph (5) of the definition of “Hazardous atmosphere” For air contaminants for which OSHA has not determined a dose or permissible exposure limit, other sources of information, such as Safety Data Sheets that comply with the Hazard Communication Standard,§ 1926.59, published information, and internal documents can provide guidance in establishing acceptable atmospheric conditions.

**Reference
Construction Safety Standards:**
Part 1. [General Rules](http://www.michigan.gov/documents/lara/lara_miosha_cs_part_1_426600_7.pdf)

Part 7. [Welding and Cutting](http://www.michigan.gov/documents/lara/lara_miosha_CS_7_3-21-2013_415072_7.pdf)
Part 35. [Confined Space in Construction](https://www.michigan.gov/documents/lara/lara_miosha_CS_35_504208_7.pdf)

**Health Standards:**Part 451. [Respiratory Protection](https://www.michigan.gov/documents/CIS_WSH_part451_54075_7.pdf) (29 CFR 1910.134)

Part 621. [Health Hazard Control for Specific Equipment and Operations for Construction](http://www.michigan.gov/documents/CIS_WSH_part621_44021_7.pdf)