

Energized Electrical Work Permit

Job /Work Order Number: _____

Date: _____

PART I: TO BE COMPLETED BY THE REQUESTER

1) Description of circuit /equipment /job location:

2) Description of work to be done:

3) Justification of why the circuit/equipment cannot be de-energized or the work deferred until the next scheduled outage:

Requester / Title	Date
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PART II: TO BE COMPLETED BY THE ELECTRICALLY QUALIFIED PERSONS DOING THE WORK:

Check when Complete

1) Detailed job description procedure to be used in performing the above detailed work:	
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2) Description of the Safe Work Practices to be employed:	
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3) Results of the Shock Hazard Analysis:	
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4) Determination of Shock Protection Boundaries:	
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5) Results of the Flash Hazard Analysis:	
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6) Determination of the Flash Protection Boundaries:	
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7) Necessary personal protective equipment to perform the task:	
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8) Means employed to restrict access of unqualified persons from the work area:	
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9) Evidence of completion of a Job Briefing including discussion of any job-related hazards:	
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10) Do you agree the above described work can be done safely?	YES	NO	(If no, return to requester)
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Electrically Qualified Person	Date	Electrically Qualified Person	Date

PART III: FACILITY APPROVAL(S) TO PERFORM THE WORK WHILE ELECTRICALLY ENERGIZED:

Maintenance / Engineering Manager	Date	Safety / General Manager	Date

Electrically Knowledgeable Person	Date	Supervisor	Date

Energized Work Checklist

To be reviewed by Foreman prior to start of work. Only valid for named wiremen and day issued.

Date: ____/____/____

Start time: ____:____ am/pm

Project: _____

Building Location: _____

Panel Location: _____

Description of Work to be Performed: _____

Specific Reason Equipment Circuit Cannot be De-energized: _____

Maximum Voltage Present: _____

Number of Voltage Sources Present: _____

Personal Protective Equipment (PPE) worn/used:

- Hard Hat
- Safety Glasses
- Face Shield/ Hood
- Flash Resistant Jacket
- Flash Resistant Bibs
- Insulated Gloves
- Insulated Mats
- Insulated Blankets
- Insulated Sleeves
- Hearing protection

Additional PPE Required: _____

Work Authorized by: _____

Title: _____

Wireman Signature: _____

Required Signature Second Wireman Assisting: _____

****On all energized circuits or equipment carrying four hundred forty (440) volts or over, as a safety measure, two (2) or more journeymen must work together.****

Owner / Customer Representative: _____

Time Work Completed: ____:____ am/pm