

FIELDER'S CHOICE ENTERPRISES, INC.

CONFINED SPACE ENTRY PERMIT – CONSTRUCTION (Valid for Maximum of 12 hours)

LOCATION: _____ Job No.: _____
DATE: _____ SHIFT: _____ DEPT. _____
TIME WORK STARTED: _____ TIME WORK COMPLETED: _____
SCHEDULED WORK TO BE PERFORMED: _____

PERSONS AUTHORIZED TO ENTER: _____

ATMOSPHERIC MONITORING:	<u>Sampling Equipment Used:</u>		
Type	Serial #	Date Last Calibrated	Calibrated By
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Monitoring Results ¹							
	Toxic Substances						
	Oxygen (O ₂)	Flammability	Carbon Monoxide(CO)	Hydrogen Sulfide (H ₂ S)	Sulfur Dioxide	Ammonia	
Acceptable Entry →	19.5 - 23.5%	< 10% of LFL	* 35 ppm	*10 ppm,+15ppm	*2ppm,+5ppm	*35 ppm	
TIME							

¹ Record Continuous Monitoring Results at least hourly.
* 8-hour Time Weighted Average-Employee can work 8 hours (longer if proper respiratory protection is worn).
+ Short-term Exposure Limit – Employee can work in area for 15 minutes.

EMERGENCY PROCEDURES

IF AN EMERGENCY SHOULD OCCUR – SUMMON HELP FIRST. DO NOT ENTER A CONFINED SPACE UNTIL QUALIFIED HELP ARRIVES AND ENTRY CAN BE MADE SAFELY. IF AN ENTRANT IS UNRESPONSIVE FOR NO APPARENT CAUSE, YOU MUST ASSUME THAT TOXIC GASES OR OXYGEN DEFICIENCY COULD EXIST. DO NOT ENTER THE SPACE WITHOUT FULL PROTECTIVE GEAR AND SELF-CONTAINED BREATHING APPARATUS.

EMERGENCY CALL _____

SIGNED _____
Qualified Person Phone / Pager

POST AT POINT OF ENTRY