

**Supplement F**

| <b>CONFINED SPACE ENTRY FORM</b>   |                         |  |   |
|--|-------------------------|--|---|
|  | Worksite location       | Confined Space (exact location):                         | Date and time to begin entry  |
| Is a specific Standard Operating Procedure (SOP) available for this Confined Space?    Yes    No             |                         |  |   |
| If Yes, use the SOP and this form to complete the task. If No, use the General CSE Procedures and this form. |                         |  |   |
| Task to be performed in the confined space   |                         |  |   |
| <b>Special hazards of this confined space:</b> (circle or write in)  |                         | <b>Special hazard controls:</b> (circle or write in)     |   |
| lack of natural ventilation  |                         | Mechanical ventilation, Continuous air testing           |   |
| Dark, wet, damp and/or metal surfaces  |                         | Lighting    GFCI protected extension cords               |   |
| falls  |                         | barricade, tripod, fall arrest system                    |   |
|  |                         |  |   |
| If inside a building, will Hot Work be performed?    Yes    No   |                         | If Yes, ensure Hot Work Permit is completed before entry |   |
| Is Lockout/Tagout required?    Yes    No   |                         | If Yes, ensure complete Lockout/Tagout before entry      |   |
| Atmospheric testing equipment: air analyzer # _____ calibrated _____   |                         |  |   |
| <b>Atmosphere test results and acceptable limits</b>   |                         |  | toxic gases:  |
| Time   | Oxygen (19.5 to 23.5 %) | Explosive gases < 10 % LEL                               | Carbon Monoxide, CO < 35 ppm _____<br>Hydrogen sulfide, H <sub>2</sub> S < 10 ppm _____<br>Others |
| Authorized entrants:   |                         |  | Attendants:   |
|  |                         |  |   |
| Signature of Lead Worker _____   |                         |  |   |
| Expiration time to end entry: _____ (No longer than 12 hours from the beginning of this entry)               |                         |  |   |
| If a communication line is appropriate - use the O-A-T-H line pull communication method.                     |                         |  |   |
| <b>Periodic atmosphere testing (at least every hour)</b>   |                         |  |   |
| Time   | Oxygen (19.5 to 23.5 %) | Explosive gases <10% LEL                                 | toxic gases   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
|  |                         |  | CO    H <sub>2</sub> S    other   |
| <b>For rescue</b> use radio or phone to call 911 or 684-2444 for a confined space rescue team.               |                         |  |   |
| When the task is complete, all entrants and equipment are out of the space, safe to remove lockout/tagouts   |                         |  |   |
| Signature of Lead Worker   |                         | Date / time  |   |
| Note here any unexpected hazardous occurrences or prohibited conditions                                      |                         |  |   |

FILE WITH SUPERVISOR FOR AT LEAST ONE YEAR

12/13/96