

TESTING, TROUBLESHOOTING, AND VOLTAGE MEASURING ELECTRICAL WORK PERMIT
Department Code: HP **Permit # HP -003**

PART I: TO BE COMPLETED BY THE REQUESTER:

- (1) Description of circuit/equipment/job location: Power Panel SS-4, breaker 4/ 480 V heat pump/ Building 348 High Bay
(2) Description of work to be done: Remove existing heat pump and replace with Carrier type
(3) Justification of why the circuit/equipment cannot be de-energized or the work deferred until the next scheduled outage:
High Bay requires temperature range of 68 deg to 74 deg

Jim Durnan/ LESO
Requester/Title

February 30, 2007
Date

PART II: HAZARD ANALYSIS:

- (1) Detailed job description procedure to be used in performing the above detailed work: Remove wires from PP SS-4 and install 2/0 wires for new unit.

- (2) Description of the Safe Work Practices to be employed: ☐ LOTO ☒ Reason not to LOTO Calibration source requires stable temperature.

(3)

Flash Boundary	4'	Flash Hazard	4	Working Distance	4
Shock Hazard	480V	Limited Approach	3-6	Glove Class	0
		Restricted Approach	1-0		
		Prohibited Approach	0-6		

- (4) Protective Equipment

<input type="checkbox"/> None	<input checked="" type="checkbox"/> Earplugs	<input checked="" type="checkbox"/> Leather Gloves	<input checked="" type="checkbox"/> Leather Shoes
<input checked="" type="checkbox"/> Cotton Clothing	<input checked="" type="checkbox"/> Face shield	<input checked="" type="checkbox"/> Voltage-rated Gloves	<input checked="" type="checkbox"/> Voltage-rated Shoes
<input checked="" type="checkbox"/> Fr Clothing	<input checked="" type="checkbox"/> Flash suit	<input checked="" type="checkbox"/> Hard Hat	<input checked="" type="checkbox"/> Safety Glasses/Goggles

- (5) Means employed to restrict the access of unqualified persons from the work area: caution tape

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

Bo Sieman
Group Leader/Supervisor

2-30-07
Date

Smart Guy
Electrically Knowledgeable Person/Lead Engineer

2-31-07
Date

Des Jockey
Chief Engineer/Delegate

2-32-07
Date

PART IV: WORK

N/A Evidence of completion of Job Briefing including discussion of any job-related hazards:
Daily pre-work briefing
Post work feedback, if required

PART V: AUTHORIZED WORKERS:

Name	Life #	Name	Life #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Authorizing Supervisor Date

Supervisor acknowledges the above personnel are properly trained, knowledgeable and experienced to work under the permit.
Forward a copy to group's safety department.