# Electrical Safety Program – Energized Electrical Work Permit

**Work Request** (To be completed by the person requesting the review)

<table>
<thead>
<tr>
<th>Work site location: (Building &amp; room number)</th>
<th>Work order/project no:</th>
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<tbody>
<tr>
<td>Planned start date/time:</td>
<td>Planned end date/time:</td>
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**Description of work:**

Equipment requested to be shut down (specify how long)

- [ ] Until work is complete
- [ ] Temporarily, while barriers are being placed

Requested by:

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<tr>
<th>Signature:</th>
<th>Title:</th>
<th>Date:</th>
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**Hazard Analysis** (To be completed by the Electrically Qualified Persons doing the work.)

**Shock Analysis/Approach Boundaries:**

(from NFPA 70E Table 130.4 (D) (2018))

- Limited approach boundary: ___ ft ___ in
- Restricted approach boundary: ___ ft ___ in

Work will be conducted within this boundary

**Results of the flash hazard analysis:**

- [ ] Determined from Table. NFPA 70E 130.7(C)(15)(A)&(B)
- [ ] Calculation results ___ ft ___ in

**Hazard/risk category for the task:**

Arc-rating (in cal/cm²) for clothing:

- [ ] 1
- [ ] 2
- [ ] 3
- [ ] 4
- [ ] N/A

Voltage-rated tools

- Voltage-rated gloves
- Heavy leather gloves
- Hearing protection (plugs)
- Safety glasses or goggles
- Leather work shoes
- Class E hard hat
- Hard hat liner – Arc-rated

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<tbody>
<tr>
<td>Flash suit jacket – Arc-rated</td>
<td>Flash suit pants – Arc-rated</td>
<td>Flash suit hood – Arc-rated</td>
<td>Face shield – Arc-rated</td>
<td>Balaclava – Arc-rated</td>
<td>25-Cal Suit</td>
<td>40-Cal Suit</td>
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</table>

Means employed to restrict the access of unqualified persons from the work area:

- [ ] Signs/tags
- [ ] Barricades
- [ ] Attendants

Has a documented job briefing with detailed procedures been conducted?

- [ ] Yes, see attached
- [ ] No

Do you agree that the work described above can be completed safely?

Signature - Electrically Qualified Person(s) | Date

Justification for the live work request:

- [ ] Shut down creates an increased/additional hazard (specify):
- [ ] Shut down is infeasible due to design or operational limitations (specify):

The next available date for shutdown is:

Request for energized electrical work:

Signature - Electrically Qualified Person(s): | Date

**Proposed Energized Electrical Work Review** (Completed by FRES Departmental Management or Appropriate Director of Facilities)

**Proposed energized Electrical work has been reviewed by:**

Signature - Supervisor: | Date

Signature – Director or Trades or Facilities: | Date

Signature – EHRS: | Date