

## **Electrical Safety Program – Energized Electrical Work Permit**

Work Request (To be completed by the person requesting the review)					
Work site location:			Work order	/project no:	
(Building & room number)					
Description of the work to			Planned end	d date/time:	
be performed:					
Equipment requested to be					
shut down (specify how		rk is complete 🗌 Temperarily, while berriers are being placed			
long)		rk is complete  Temporarily, while barriers are being placed			
Requested by:	Signature:	Titl			Date:
Hazard Analysis (To be compl			ons doing the	work.)	
Shock Analysis/Approach Boundaries::		(from Table 130.4 (D)			
Limited approach boundary:		ft in			
Restricted approach boundary:		ft ft in U Work will be conducted within this boundary			
Prohibited approach boundary:		ftin Work will be conducted within this boundary			
Results of the flash hazard analysis		The flash protection boundary is 4 ft-0 in for systems that are 600 volts or less based on the product of clearing times of 6 cycles (0.1 second) and the available bolted fault			
		current of 50 kA or any combination not exceeding 300 kA cycles (500 ampere seconds).			
		Calculation results ft in			
Hazard/risk category for the task:		0 1 2 3 4 (from Tables 130.7 (C)(15) (A) & (B))			
Arc- rating (in cal/cm <sup>2</sup> ) for clothing:		□N/A (cat 0) □4 (cat	1) 8 (cat 2	) 🗌 25 (cat 3) 🗌	40 (cat 4)
Voltage-rated tools		Short-sleeve shirt (nat fiber)			
Voltage-rated gloves		Long-sleeve shirt (na			nts – Arc-rated
Heavy leather gloves		Long pants (nat fiber)			
Hearing protection (plugs)		Long-sleeve shirt – Arc-rated			
Safety glasses or goggles		Long pants – Arc-rated Balaclava – Arc-rated			
Leather work shoes		Coveralls – Arc-rated			
Class E hard hat		Rainwear – Arc rated	1		
Hard hat liner – Arc-rated					
Means employed to restrict the access of		Signs/tags Barrica		ndants	
unqualified persons from the work area:		Signs/tags Barricades Attendants			
Has a documented job briefing with		Yes, see attached No			
detailed procedures been conducted?					
Do you agree that the work described		Signature - Electrically C	Qualified Pers	on(s)	Date
above can be completed safely?					
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
Drenered Energined Electrical Work Devices (Completed by EDEC Departmental Management on Association					
Proposed Energized Electrical Work Review (Completed by FRES Departmental Management or Appropriate Director of Facilities.					
Proposed energized		Signature - Supervisor:		Date:	
Electrical work has been		Signature – Director:		Date:	
reviewed by:		Signature – Environmental Health & Safety:			
		Signature - Environmen	ntal Health &	Safety:	Date: