# Energized Work Permit

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| Part I: To be completed by the requestor or supervisor of the job  |
| Requestor’s Name and title: | Request Date: |
| Description of Equipment:   | Job # and Location:  |
| Description of Work to Be Done:  |
| Justification of why the equipment cannot be de-energized or the work delayed until the next scheduled outage:  |
| **Part II: To be completed by the qualified person(s) completing the work. Attach responses on separate page(s) if necessary.** **Check when Complete** |
| Hazards present while system remains energized:  | 🞎 |
| Detailed description of procedure to be used in performing the above work: | 🞎 |
| Description of safe work practices to be employed:  | 🞎 |
| Voltage exposure (shock hazard analysis):  | 🞎 |
| Determination of shock protection boundaries:  | 🞎 |
| Results of flash hazard analysis:  | 🞎 |
| Determination of flash protection boundaries:  | 🞎 |
| PPE required to safely perform the task:  | 🞎 |
| Method used to restrict access to the work area:  | 🞎 |
| Do you agree the above work can be done safely? YES \_\_\_ (proceed to Part III) NO \_\_\_\_ (return to requestor) **Qualified Person:**   **Name Title Signature Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Part III: To be completed by LLE Safety Officers** |
| **Approvals:**   **Name Title Signature Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Note:** ***Route Permit to LLE Safety Officers***. A minimum of two safety officers must approve energized work. When job is finished, forward to Chief Safety Officer for review and retention. |