



# HOT WORK PERMIT

References: NFPA 51B / 306 / OSHA 1915  
NAVSEA Standard Item 009-07 & 009-08

Insert Company Name / Logo

This permit is effective for 24 hours unless a shorter period of time is specified, or conditions change. Loss of gas free status in the location(s) below cancels the permit. Post a copy at worksite and maintain a record of the permit in accordance with company policy.

Form Number:

Permit Expiration (Date/Time)

## Section I: Hot Work Permit Supervisor Request

Start Date:	Start Time:	Ship / Vessel:	Vessel Location:
Compartment Name:	Compartment Type: <input type="checkbox"/> Confined <input type="checkbox"/> Enclosed <input type="checkbox"/> Open		Compartment Location: <input type="checkbox"/> Deck <input type="checkbox"/> Bulkhead <input type="checkbox"/> OVHD <input type="checkbox"/> Stanchion
Compartment #:	Piping System: <input type="checkbox"/> Upper LVL <input type="checkbox"/> Mid LVL <input type="checkbox"/> Lower LVL		
Ship's Contract #:	CMC Cert./SCP Log required in Space or Adjacent Space or System? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Ship's Item #:	Safety/Certified Marine Chemist (CMC)/Shipyard Competent Person (SCP) Instructions/Gas Free Scope & Log:		
Work Authorization Form (WAF) Required? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Adjacent/Affected Spaces, Name & Compartment Numbers:	<b>Current Gas Free Status</b>	<b>Enter with Restrictions?</b>	<b>Type of Work</b>
Scope of Work:	<input type="checkbox"/> Not Required <input type="checkbox"/> Safe for Workers <input type="checkbox"/> Not Safe for Workers <input type="checkbox"/> Safe for Hot Work	<input type="checkbox"/> Inerted Atmosphere <input type="checkbox"/> Enter with Restrictions <input type="checkbox"/> Not Safe for Hot Work <input type="checkbox"/> Limited Hot Work	List Restrictions:  <input type="checkbox"/> Grinding <input type="checkbox"/> Brazing <input type="checkbox"/> Welding <input type="checkbox"/> Stainless Welding  <input type="checkbox"/> Air Arcing <input type="checkbox"/> Plasma Cutting <input type="checkbox"/> Other (list below):
Supv Name:	Supv Signature:	Supv Badge:	Supv Phone #:

## Section II: Ship's Force Notification Acknowledgement

Signature:	Date:
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## Section III: HWO/FW/PAI/ Shift Condition Verification

### III.A) HWO & Each FW to validate, and PAI/HWS to verify conditions 1-10 below, prior to the start of hot work.

<ol style="list-style-type: none"> <li>Compliant fire extinguisher(s) [sealed, pinned, tagged, &amp; charged].</li> <li>Combustibles cleared 35FT/flamable liquids 50 FT (fire-retardant containment placed).</li> <li>NO hot work w/in 50' of dust collectors/associated hoses, fuel cells or flammable liquid storage lockers.</li> <li>Verify SCP log has been updated daily or as often as necessary to maintain atmospheric conditions.</li> <li>MCC / Gas Free Log / Gas Free Work Scope specified, read &amp; verified by each HWO &amp; FW.</li> <li>Qualified FW assigned (must have proof of qualification and be identified as FW).</li> <li>HWO has ensured FW has immediate access, and established communications.</li> <li>Ensure proper working ventilation established in all required / affected areas.</li> <li>Paint (4" min.)/Lagging (12" min.) removed from hot work on all affected surfaces/covered.</li> <li>HWO verifies approved Work Authorization Form (WAF) posted for hot work (if required).</li> </ol>	For any UNSAT condition, list comments below:
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### III.B) All Fire Watches: 1) Verify conditions of III.A & 2) Fill in the rows below.

SIGN 1<sup>st</sup>

Shift	Name (Last, First)	Badge #	Initial	Time	Shift	Name (Last, First)	Badge #	Initial	Time	Shift	Name (Last, First)	Badge #	Initial	Time

### III.C) Hot Work Operator: 1) Verify conditions of III.A & 2) Fill in the rows below.

SIGN 2<sup>nd</sup>

Shift	Name (Last, First)	Badge #	Initial	Time	Shift	Name (Last, First)	Badge #	Initial	Time	Shift	Name (Last, First)	Badge #	Initial	Time

### III.D) Permit Authorizing Individual: 1) Verify conditions of III.A & 2) Fill in the rows below to authorize the start of hot work.

SIGN 3<sup>rd</sup>

Shift	Name (Last, First)	Badge #	Initial	Time	Comments
1					
2					
3					

## Section IV: Surveillance by Permit Authorized Individual (PAI)

Shift	Name (Last, First)	Badge #	Signature	Time	Shift	Name (Last, First)	Badge #	Signature	Time	Comments:

## Section V: End of Shift Inspection (PAI or HWS)

An inspection of the area must be conducted 30 min. after completion of the hot work. This is the final action required to close this permit [1915.504(c)(2)(iv)]. Remain in the area for at least 30 minutes after completion of the hot work, unless the employer or its rep. surveys the area and determines that there is no further fire hazard.

Shift	Signature	Date	Time	Comments
1				
2				
3				

## Section VI: Permit Closure

PAI or HWS Signature:	This section closes out the Hot Work Permit. Once signed, the permit shall be removed and retained in accordance with Company procedures.
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