



Energy Control/Confined Space Procedure

** Written Energy Control Procedure for Equipment Lockout Tagout**

** Written Procedure for working in Confined Space**

Company:

Location:

Date:

Equipment:

Task:

Project Manager:

Emergency Response Instructions:

Emergency Response Telephone Numbers:

Fire Department:

Ambulance:

Supervisor:

Select all that apply

X	Procedure Category	Suggested Equipment/Permits/Training	↓	↓
<input type="checkbox"/>	<i>Safety Tools</i>	Permit		
<input type="checkbox"/>		Buddy System		
<input type="checkbox"/>		Coveralls		
<input type="checkbox"/>		Eye/Ear Protection		
<input type="checkbox"/>		Radio		
<input type="checkbox"/>		SCBA		
<input type="checkbox"/>		Respirator		
<input type="checkbox"/>		Air Quality Monitor		
<input type="checkbox"/>		Harness with line		
<input type="checkbox"/>		Scaffold		
<input type="checkbox"/>		Fall Protection		
<input type="checkbox"/>		ARC Flash PPE		
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>	<i>Permitted Confined Space</i>	High Temperature Stress		
<input type="checkbox"/>		Air Quality		
<input type="checkbox"/>		Venting or Exhaust Fan locked on		
<input type="checkbox"/>		Damper position locked		
<input type="checkbox"/>		Oxygen Depletion, Welding		
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>	<i>ARC Flash Prevent & Protect</i>	ARC Flash training up to date and verified		
<input type="checkbox"/>		Verify correct ARC Flash PPE available		
<input type="checkbox"/>		Electrical LOTO verified		
<input type="checkbox"/>				

