**Energized Electrical Work Permit**

**Only when power can not be de-energized**

**PART I: TO BE COMPLETED BY THE REQUESTER**

1) Detailed job description procedure to be used in performing the above described work:

2) Description of the Safe Work Practices to be employed:

3) Justification of why the circuit/equipment cannot be de-energized or the work deferred until the next scheduled outage:

 Requester Name/Title : Date:

**PART II: TO BE COMPLETED BY THE ELECTRICALLY QUALIFIED PERSONS DOING WORK:**

1) Detailed job description procedures to be used in performing the above description work:

2) Description of the Safe Work Practices to be employed:

3) Results of the Shock Hazard Analysis:

4) Determination of Shock Protection Boundaries:

5) Results of the Flash Hazard Analysis:

6) Determination of the Flash Protection Boundary:

7) Necessary personal protective equipment to safely perform the assigned task:

 Identify the protective clothing or equipment required for the job: Note all equipment must have current test and/or certification.

\_\_ Safety Glasses and/or Face Shield \_\_ Non-Conductive Hard Hats

\_\_ Certified Rubber Gloves and Leather Protective \_\_ Insulating Sleeves and Aprons

\_\_ Dielectric Blanket and Insulated Mats \_\_ Hearing Protection

\_\_ Respiratory Equipment \_\_ Insulated Tools.

\_\_ Other: Cal rated clothing, etc.

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

9) Evidence of completion of a Job Briefing including discussion of any job-specific hazards:

 Confirmation of Electrical Workers' Training and Qualifications:

The employee(s) must have successfully completed formal employer-approved training in the following subjects:

 Date Completed

 Electrical Safety \_\_\_\_\_\_\_\_\_\_\_\_\_

 Lockout-Tag out \_\_\_\_\_\_\_\_\_\_\_\_\_

 CPR \_\_\_\_\_\_\_\_\_\_\_\_\_

 First Aid \_\_\_\_\_\_\_\_\_\_\_\_\_

 70E Standard \_\_\_\_\_\_\_\_\_\_\_\_\_

10) Do you agree the above described work can be done safely? Yes No (If no, return to requester)

 Electrically Qualified Person(s): Date:

11) Safety Checklist for Live Electrical Work:

 Specific work areas must be cordoned to prevent unauthorized access to the live work area.

1. A minimum of two equally qualified workers must be present when the live work is accomplished.
2. An individual certified in First Aid and CPR shall be immediately available to the area.
3. All persons in the work areas should remove all jewelry.
4. If ladder access is required, only fiberglass ladders are authorized.
5. If access to the live work is in a wet area, place wood planking or it's equivalence on the floor.
6. Work boots for persons performing the live work should be ANSI approved for electrical work.
7. Insulated gloves worn by workers performing the live work must have a current dielectric test date.
8. All work must comply with OSHA 1926(Subpart K, NEC, 70 E standards and applicable NIOSH Polices.

**PART III: ACCEPTANCE TO PERFORM THE WORK WHILE ELECTRICALLY ENERGIZED:**

**Contractor Requesting Electrical Permit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contractor Electrical Permit Plan Prepared By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contractor Electrical Permit Plan Reviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contractor Safety Engineer/Manager Reviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_**

Airports Authority Construction Program Safety Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NFPA 70E Job Briefing and Planning Checklist**

**Identify**

What are the hazards? Potential for arc flash

What voltage levels are involved? Unusual work conditions

What skills are required? Is this a multiple -person project?

"Foreign" voltage source present?

Notes:

**Ask**

Can the equipment be de-energized? Y or N Is a "standby person" required?

Are there possible back feeds of the circuits

 to be worked on?

Notes:

**Check**

Job Plans Safety procedures

One Lines and vendor prints Vendor information

Status Board For up-to-date information Individuals familiar with facility?

 on system and resources.

Notes:

**Know**

What is the Job? Who else needs to know? Communicate! Who is in charge?

Notes:

**Think**

The extra event ….What if? Us the right tools, equipment and PPE

Lock - Tag - Test - Try Install barriers and barricades

Test for voltage first. What else…?

Install and remove grounds

Notes:

**Prepare for an Emergency**

Who is First Aid/CPR Trained? Exact work location.

Telephone location? Shut off in case of emergency.

Fire alarm locations? Location of emergency equipment.

Confined space rescue available if required? Is required emergency equipment Emergency telephone numbers. Available? Radio communications available?

Fire extinguisher

Notes: