



SAFETYWORKCLEARANCE		Permitno.
Project:		EmergencyContactNos:
BHELSub-contractor:		

EXCAVATIONACTIVITYPERMIT

Areaof work:_____ Date:_____ Time:_____

_____, Name of Sub-ContractorSiteEngineer(PermitRequestingAuthority):_____ Sign:_____ Name of WorkPerformingContractor:_____

_____, Name of Package Incharge:_____ Sign:_____ Date:_____ Description of Work: _____

DurationofWorkExecution*:FromTime:_____ Date:_____ toTime:_____ Date:_____

The abovesigningperson(s)will beresponsibletoensurethattheabovedescribedworkwill bedoneunderallthesafetyprecautionsmentionedon thepermit to work.

Thefollowingprecautionsareto be taken:

No.	Item	Yes	Not required/ Remarks
1	Precautionstaken for UndergroundElectricalCable		
2	Precautionstaken for Under /Abovegroundsewer/DrinkingWater Line		
3	Precautionstaken for UndergroundTelecommunicationLine		
4	Precautionstaken for UndergroundProduct/Utility Line		
5	Precautionstaken for UndergroundFireWaterLine		
6	Shoring/ Shuttering /Sheetpilingdoneto preventcollapse ofexcavationwalls.Strength ofExcavationwallensuredat alltimes		
7	Hard Barricading& EdgeProtectionprovided		
8	Separate SafeAccessforMan and Vehicle		
9	Lightingarrangement		
10	BanksManProvided		
11	RequiredbasicPPEs provided		
12	Slope Cutting/BenchingMaintained		
13	Excavatedsoil/ ConstructionMaterial / equipmentkeptawayfromtheedge.		
14	Firstaidin attendance.		
15	Additionalpermit(If requiredpleasespecify below)1. 2.		

Name ofSub-ContractorSafetyOfficer:_____ Sign:_____ Date:_____ Time:_____

ReviewedandapprovedbyBHEL Site Engineer (PermitIssuingAuthority):

Name:_____ Sign:_____ Date:_____ Time:_____ Name of BHEL SafetyRepresentative:_____ Sign:_____

Iunderstandtheprecautiontobetakenasdescribedaboveandasperprojectrequirementandherebyconfirmthatworkwill beexecutedundermy supervision byfollowing allprecautionandSafetyRules.

Nameof WorkPerformingAuthority:_____ Sign:_____ Date:_____ Time:_____

Permit Cancellation/ Closure:

Iherebydeclarethattheworkiscancelled/complete,allworkersundermycontrolhavebeenwithdrawnandthesiterestoredtosafetidycondition.

Name ofWorkperformingAuthority:_____ Sign:_____ Date:_____ Time:_____ Name ofSCSiteEngr. (PermitRequestingAuthority):_____ Sign:_____ Date:_____ Time:_____

_____ Name of BHEL SiteEngr.(PermitIssuingAuthority):_____

_____. Sign: _____ Date: _____ Time: _____

(*Permit valid subject to daily renewal as per overleaf instructions)

Original at BHEL site

Second Copy - BHEL SAFETY

Third Copy: BHEL Sub-Contractor

PERMIT RENEWAL

Sl.No.	Extension Period		Signature of Contractor Site Engineer	Signature of Contractor / BHEL Safety Officer
	Date From.....	(Time-Hrs) From.....		
	To.....	To.....		
1.				
2.				
3.				
4.				
5.				
6.				

TO BE SIGNED JOINTLY BY THE CONTRACTOR HSE & EXECUTION AFTER THE WORK IS OVER

Permit is here by returned / closed after completing the job.

Site Engineer, Contractor	Site HSE Engineer, EPC Contractor
Certified that the subject work has been completed/stopped and the area is cleaned.	Certified that the subject work has been completed/stopped and the area is cleaned.
Signature (With Dt. & Time):	Signature (With Dt. & Time):
Name:	Name:

General Instructions:

1. Permittee to observe precautions as mentioned on pre-page, mentioned by concerned discipline coordinator.
2. Permit must be available at the site all the time during work with permit receiver.
3. This Permit is valid for maximum 7 days or as indicated. Every day permit shall be renewed before start of the shift by EPC contractor both HSE and Site Engineer.
4. Work location to be constantly supervised by Contractor and BHEL HSE and Execution, to ensure precautions as per this Permit and other HSE requirements.