



SAFETYWORKCLEARANCE		Permitno.
Project:		EmergencyContactNos:
BHELSub-contractor:		

HEAVY/COMPLEXCRITICALLIFTINGACTIVITYPERMIT

Areaof work:_____ Date:_____ Time:_____

_____, Name ofSub-ContractorSiteEngineer(PermitRequestingAuthority):_____ Sign:_____ Name ofWorkPerformingContractor:_____

_____, Name ofPackage Incharge:_____ Sign:_____ Date:_____ Description ofWork: _____

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

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

Thefollowingprecautionsareto be taken:

No.	Item	Yes	Not required/ Remarks
1.	Crane usedfor liftingactivityTPI tested,certifiedandapproved for ratedlifting		
2.	All liftingtackles,gears/appliancesarettestedandcertifiedforliftingworks.		
3.	Crane operator istrainedandcompetent forliftingoperation.		
4.	Lifting sling/beltis protectedagainstsharpedge ofthejobsto belifted.		
5.	Liftinghookisproperlylatchedto preventmaterialfallingover		
6.	Accessandexit marked andwithoutobstruction.		
7.	In caseof liftingmultiplematerialsatonce,samearetiedupwith strong rope/ material		
8.	Area belowliftingactivity barricaded topreventmovement		
9.	Minimum2guidelineshavebeenprovidedforbalancingandguidingjobstobe lifted.		
10.	Peripheryareaofcraneboomsaswell as liftingjobisbarricadedandunauthorised/no-entrysignboard posted.		
11.	Rigger andsignalman istrainedandcompetent forliftingwork.		
12.	No liftingactivity to becarriedout duringlightening,heavywind/rain.		
13.	If scaffoldingto beusedduringlift,scaffoldingwithvalid tagavailable foruse.		
14.	Add drawing/procedureetc.relevantforthelifting.		
15.	Others.		

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

ReviewedandapprovedbyBHEL Site Engineer (PermitIssuingAuthority):

Name:_____ Sign:_____ Date:_____ Time:_____ Name of BHEL Safety Representative:_____ Sign:_____

Iunderstandtheprecautiontobetakenasdescribedaboveandasperprojectrequirementandherebyconfirmthatworkwill beexecutedundermy supervision by followingallprecautionandSafetyRules.

Name of WorkPerformingAuthority:_____ Sign:_____ Date:_____ Time:_____

Permit Cancellation/ Closure:

Iherebydeclarethattheworkiscancelled/complete,allworkersundermycontrolhavebeenwithdrawnandthesiterestoredtosafetidyconditio

n.

Name of Workperforming Authority: _____ Sign: _____ Date: _____ Time: _____ Name
of SC Site Engr. (Permit Requesting Authority): _____ Sign: _____ Date: _____ Time: _____

Name of BHEL Site Engr. (Permit Issuing Authority): _____

Sign: _____ Date: _____ Time: _____

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

Original at BHEL site	Second Copy - BHEL SAFETY	Third Copy: BHEL Sub-Contractor
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PERMIT RENEWAL

Sl.No.	Extension Period		Signature of Contractor Site Engineer	Signature of Contractor /BHESafety 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.