University Of Pittsburgh Confined Space Pre-Entry Checklist

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<th>Job Site:</th>
<th>Equipment Involved:</th>
<th>Work to be performed:</th>
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**PRE-ENTRY**

1. **Atmospheric Checks**
   - **Time:** __________
   - Oxygen ________ %
   - Explosive ________ %LEL
   - Toxic ________ PPM

2. **Source Isolation (No Entry):**
   - Energy sources (incl/engulfment) N/A Yes No
   - blinded, blocked, disconnected or locked-out, etc.

3. **Ventilation Modification:**
   - Mechanical N/A Yes No
   - Natural ventilation only

4. **Atmospheric Checks** (after isolation & ventilation)
   - Oxygen ________ % 19.5% to 23.5%
   - Explosive ________ %LEL < 10 %
   - Toxic ________ PPM *
   - Time __________

* Entry and Work duration limits to be set prior to entry.

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1. **Entry, standby and backup person:** N/A Yes No
   - Successfully completed required training?
   - Is it current?

2. **EQUIPMENT:**
   - Direct reading gas monitor-tested
   - Safety harnesses and lifelines for entry and standby persons.
   - Hoisting equipment
   - Powered communications
   - SCBA’s for entry & standby persons.
   - Protective equipment

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3. **RESCUE PROCEDURE:**

   In Emergency call Campus Police at 412-624-2121

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*If there is no reason to believe that conditions exist to require permit entry then complete the Pre-Entry checklist and classify accordingly.*

- Permit
- NonPermit

*If PERMIT space or there is reason to believe that conditions may change adversely, then proceed to the Entry CheckList portion of this permit.*

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*We have reviewed the work authorized by this permit and the information contained herein. Written instructions regarding the specific hazards of the confined space entry have been reviewed with all employees.*

Entry Supervisor/ Foreman

(Name)  (Signature)