



# TRIUMF HOT WORK PERMIT

*This permit must be completed by worker and signed by OH&S for all welding, cutting, and grinding operations performed outside of a designated welding facility*

Name: _____	Date: _____
Group: _____	Local: _____

Location: _____
Description: _____
Is material radioactive? <span style="margin-left: 150px;">Yes</span> <span style="margin-left: 100px;">No</span>
If yes, Radiation Level at 50 cm _____
Radiation Level on Contact _____
Removable Contamination _____
Surveyed by: _____ Date: _____

Hazards	Description	Remedial Action
Combustibles _____	_____	_____
Flammables _____	_____	_____
High Voltage _____	_____	_____
Radiation _____	_____	_____

Safety Equipment	
Local Mechanical Ventilation	Portable Dry Chemical ABC Extinguisher
Air-Purifying Half-Mask Respirator	Welding Blankets
Supplied Air Half Mask Respirator	Temporary Enclosure
Welding Screens	

Safety Procedures	
Continuous Fire Watcher During Hot Work	Monitor for Explosive Atmospheres
Fire Watcher After Completion	Confined Entry Procedures
<i>(no less than 60 min. after completion)</i>	
Clean Area Upon Completion	
Final Inspection	
<i>(work area, and exposed surroundings must be inspected 4h after completion of the work)</i>	
OH&S Authorization: _____	Date: _____