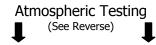
SUNY Potsdam Confined Space Entry Permit

Revision 1.0

This form must be completed by the Entry Supervisor prior to Confined Space entries and be posted at the site of entry	This form must be con	npleted by the Entry	v Supervisor prior to	o Confined Space e	entries and be	posted at the site of entry.
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Date:	Time Issued:		Time Expired:					
Location:	Reason For Entry:							
Authorized Personnel								
Your signature indicates you have been trained on the hazards of this space, your duties, and precautions you must take for this entry.PositionName (print)Signature								
	ivanie (p	rinc)	Signatu	le				
Entry Supervisor Attendant (Watchperson)								
Attendant								
Entrant								
Entrant								
Entrant								
	iciency 🗌 Combustib		contaminants					
Atmospheric Hazards: Oxygen deficiency Combustible gas Toxic contaminants Noise Other								
Physical Hazards: Mechanical Electrical Heat Other								
Hazard Controls: Ventilation Lockout/Tagout Other								
Communication Methods with Entrants:								
Communication Methods to Contact Emergency Services: Phone Radio Other Call University Police for all Emergencies: Dial 911 or 2222 from any on-campus phone or (315)267-2222 from a cell phone.								
	Coveralls Tyvek® s							
□ Welding gloves □ Welding hood □ Harness/life line □ Hearing protection □ Respiratory protection								
\star Hard Hat \star Eye protection \Box Tripod/winch \Box Other								
Confined space entrants are required to wear (at a minimum) hard hats & eye protection.								
Traffic Control: Barricades Vests Flags Signs Hot work: Yes (Hot Work Permit Required) No								
If the confined space entry involves welding or torch cutting or the generation of other hazardous Yes DNA								
material, has local exhaust been provided and directed to as safe location, or filtered?								
	If compressed gases are to be used inside the confined space, is the source (pressurized tanks) located							
outside the space and have hoses and pi								
Is the confined space set up for continue		tible gas monitorin	g and is the					
watchperson trained to read and respond	d to the meter?							
Special Precautions:								
Entry Authorized by:								
(Entry Supervisor)								
(Print Name		(Signature)	(Phone					
For Contractors:	C	ollege Project Man	ger you are reporting to)?				
(Compony Nome)		(Mama)	/ח/	2000)				
(Company Name) (Name) (Phone) Reminder: Once Confined Space Entry is completed this Permit must be returned to a College Supervisor or College Project Manager								
within 24hrs and kept on file for a minimum of three years.								





Atmospheric Testing Log		Type of Monitoring Equipment:					Calibration Date:		
Tests	Acceptable Entry Conditions	(Initial) 1 st hr.	2 nd hr.	3 rd hr.	4 th hr.	5 th hr.	6 th hr.	7 th hr.	8 th hr.
Oxygen (O ₂)	19.5-23.5%								
Combustible Gas (%LEL)	0%								
Carbon Monoxide (CO)	35ppm								
Hydrogen Sulfide (H ₂ S)	10ppm								
Initials of Tester									
Call University Police for all Emergencies Dial 911 or 2222 from any on-campus phone or (315)267-2222 from a cell phone.									

SUNY Potsdam Confined Space Entry Permit (See Reverse)