## **Confined Space Classification**



Date: Time:	M □PM	Location/Project:
Work Description:		
Pre-Entry I	Hazaro	d Analysis:
<ol> <li>Air monitor Calibrated □ Yes □ No</li> <li>Note: For continuous atmospheric monitoring, the monitor must be equipped for warning sounds &amp; lights.</li> </ol>	3.	PPE List – Be Specific the task at hand:
Air monitor Results     TEST THE CONFINED SPACE PRIOR TO ENTRY		
Oxygen %:	4.	Equipment List:   Mechanical Ventilation - best practice
LEL:		☐ Hoisting Equipment☐ Radios
H <sub>2</sub> S:		☐ Non-Spark Tools
		☐ Low Voltage Light Others Specify:
Note: Any abnormal reading requires consultation with the safety department before entry.		
5. Potential Hazardous Atmosphere: $\Box$ NO $\Box$	YES	
If <b>YES</b> , DO NOT PROCEED ANY FURTHE	R, a per	mit is required prior to entry.

Contact the project Safety Representative

If **no**, ensure adequate *ventilation* is maintained to proceed with non-permit entry.