



UVA-FM HOT WORK PERMIT

BEFORE INITIATING HOT WORK, ENSURE PRECAUTIONS ARE IN PLACE! MAKE SURE AN APPROPRIATE FIRE EXTINGUISHER IS READILY AVAILABLE!

This Hot Work Permit is required for operations involving open flames or producing heat and/ or sparks. This includes, but is not limited to: Brazing, Cutting, Grinding, Soldering, Thawing Pipe, Torch-Applied Roofing, and Cadwelding.

<p align="center">INSTRUCTIONS</p> <p>1. Complete this form and turn it in to your supervisor and Fire Alarm and HVAC Shops as needed.</p> <p>2. This form must be submitted 24 hours before work is started (except in emergency situations; see Appendix A of the <i>Hot Work Safety Guide</i>).</p>	<p align="center">REQUIRED PRECAUTIONS CHECKLIST</p> <p><input type="checkbox"/> Automatic Fire Detection has been disabled (A/N).</p> <p><input type="checkbox"/> Available sprinklers, hose streams, and extinguishers are in service/operable.</p> <p><input type="checkbox"/> Hot work equipment is in good repair.</p> <p><input type="checkbox"/> <u>Requirements within 10 m (35 feet) of work:</u></p> <ul style="list-style-type: none"> • Flammable liquids, dust, lint, and oil deposits have been removed. • Explosive atmosphere in area has been eliminated • Floors have been swept clean. • Combustible floors have been wet down, covered with damp sand or fire-resistant sheets. • Other combustibles have been removed where possible. Otherwise protect with fire-resistant tarpaulins or metal sheets are in place. • All wall and floor openings are covered. • Fire-resistant tarpaulins are suspended beneath work. <p><input type="checkbox"/> <u>Work on walls or ceilings/enclosed equipment:</u></p> <ul style="list-style-type: none"> • Construction is non-combustible and without combustible covering or insulation • Combustibles on other side of walls have been removed. • Danger exists by condition of heat into another area • Enclosed equipment has been cleaned of all combustibles. • Containers have been purged of flammable liquids/vapors. <p><input type="checkbox"/> <u>Fire Watch / Hot Work area monitoring:</u></p> <ul style="list-style-type: none"> • Fire watch will be provided during and for 30 minutes after work, including any coffee or lunch breaks. Name: _____ Phone #: _____ • Fire watch is supplied with suitable extinguishers • Fire watch is trained in use of this equipment and in sounding alarm. • Fire watch may be required for adjoining areas, above and below. • Monitor hot work area 30 minutes after job is completed. <p><u>Other precautions taken:</u></p> <p>Yes <input type="checkbox"/> / No <input type="checkbox"/> Confined space entry permit required?</p> <p>Yes <input type="checkbox"/> / No <input type="checkbox"/> Area protected with smoke or heat detection?</p> <p>Yes <input type="checkbox"/> / No <input type="checkbox"/> Ample ventilation to remove smoke/vapor from work area?</p> <p>Yes <input type="checkbox"/> / No <input type="checkbox"/> Lockout/tag-out required?</p>
<p>HOT WORK BEING DONE BY:</p> <p><input type="checkbox"/> UVA Employee</p> <p><input type="checkbox"/> Contractor _____</p> <p><input type="checkbox"/> Phone # _____</p>	
<p>HOT WORK PROJECT:</p> <p>W.O. # _____</p> <p>Submitted Date: _____</p> <p>Expected Start Date: _____ Time _____</p> <p>Expected Stop Date: _____</p>	
<p>Location / Building / Floor _____</p>	
<p>Nature of Job / Object _____</p>	
<p>AUTHORIZATION:</p> <p>I verify the above location has been examined, the precautions checked on the Required Precautions Checklist have been taken to prevent fire, and permission is authorized for work.</p> <p>Name: _____ Supervisor/ Responsible Party</p> <p>Signature: _____</p> <p>Phone #: _____</p>	
<p>HVAC TECHNICIAN (A/N):</p> <p>Name: _____</p> <p>Phone: _____</p> <p><input type="checkbox"/> HVAC systems evaluated and shutdown or modified as necessary.</p> <p>Date / Time: _____ Initials _____</p> <p>Reactivated: Date/Time: _____</p>	
<p>FIRE ALARM TECHNICIAN (A/N):</p> <p>Name: _____</p> <p>Phone #: _____</p> <p><input type="checkbox"/> Fire Detection Disabled Date / Time: _____ Initials _____</p> <p>Fire Detection Reactivated Date / Time: _____ Initials _____</p>	
<p>Permit Reviewed by:</p> <p>Name: _____</p> <p>Phone #: _____</p>	<p align="center">FOR QUESTIONS REGARDING THIS PERMIT CONTACT FM-OHS AT (434) 297-6379</p>