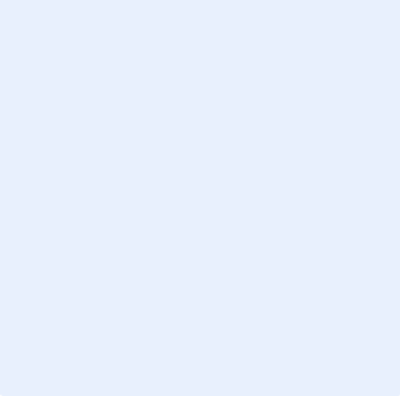
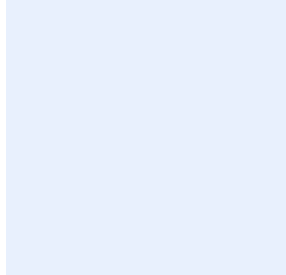


Confined Space Hazard Assessment

1. Summary	
Confined Space Name: Click or tap here to enter text.	Confined Space ID#: Click or tap here to enter text.
Facility Click or tap here to enter text.	Plant Name/No: Click or tap here to enter text.
Confined Space Location Description Click or tap here to enter text.	
Type of Space: <input type="checkbox"/> Vessel <input type="checkbox"/> Pit/Sump <input type="checkbox"/> Manhole <input type="checkbox"/> Tank <input type="checkbox"/> Other Description: Click or tap here to enter text.	
Space Use/Function: Click or tap here to enter text.	
Space Contents: Click or tap here to enter text. SDS Number: Click or tap here to enter text.	
<b style="color: red;">Classification (may change from task to task) <input type="checkbox"/> Confined <input type="checkbox"/> Immediately Dangerous to Life and Health (IDLH)	
Notes: Click or tap here to enter text.	
1.1 Assessment	
Assessment Approved By (Asset Owner): Click or tap here to enter text.	Date Assessment Performed: Click or tap here to enter text.
Assessor Name & Role: Click or tap here to enter text.	Assessor Name & Role: Click or tap here to enter text.
Assessor Name & Role: Click or tap here to enter text.	Assessor Name & Role: Click or tap here to enter text.
Assessor Name & Role: Click or tap here to enter text.	Assessor Name & Role: Click or tap here to enter text.
1.2 Assessment Review	
Assessment Reviewed By (Controlling Authority): Click or tap here to enter text.	Review Date: Click or tap here to enter text.
Assessment Reviewed By (Controlling Authority): Click or tap here to enter text.	Review Date: Click or tap here to enter text.
Assessment Reviewed By (Controlling Authority): Click or tap here to enter text.	Review Date: Click or tap here to enter text.

This assessment must be reviewed by prior to any entry

Confined Space Hazard Assessment

2. Space Specifics	
2.1. Space Characteristics	
Space Shape: Click or tap here to enter text.	Space Length: Click or tap here to enter text.
Space Height: Click or tap here to enter text.	Space Width: Click or tap here to enter text.
Space Diameter: Click or tap here to enter text.	Space Volume: Click or tap here to enter text.
Space Location: <input type="checkbox"/> Above Ground <input type="checkbox"/> Below Ground <input type="checkbox"/> Elevated (ladder access)	
Equipment Located Inside Space: Click or tap here to enter text.	
Description of Internals (Open/Congested/Obstacles/Inwardly converging walls/downward sloping floors/ tapers to a small cross-section) Click or tap here to enter text.	
2.2. Entry/Exit Access Points	
2.2.1 Overview Insert a drawing that shows all entry points and ensure they are identified and numbered	
	
Entry Point 1 – duplicate table for all entry points	
Shape: Click or tap here to enter text.	
Dimensions: Click or tap here to enter text.	
Diameter: Click or tap here to enter text.	
Location: Click or tap here to enter text.	
External Notes: Click or tap here to enter text.	
Internal Notes: Click or tap here to enter text.	

Confined Space Hazard Assessment

3.2 Additional Hazards				
Hazard		Detail	Control	Test/Verify
Low Oxygen (<19.5%)	<input type="checkbox"/> Yes			
Oxygen Enriched (>23%)	<input type="checkbox"/> Yes			
Chemical	<input type="checkbox"/> Yes			
Particulate/Dust	<input type="checkbox"/> Yes			
Engulfment	<input type="checkbox"/> Yes			
Drowning	<input type="checkbox"/> Yes			
Residue/Scale/Sludge	<input type="checkbox"/> Yes			
Sewage	<input type="checkbox"/> Yes			
Animal Organic Matter	<input type="checkbox"/> Yes			
Mold/Viruses/Pathogens	<input type="checkbox"/> Yes			
Noise	<input type="checkbox"/> Yes			
Ionizing Radiation	<input type="checkbox"/> Yes			
Non-ionizing Radiation	<input type="checkbox"/> Yes			
Laser	<input type="checkbox"/> Yes			
Vibration	<input type="checkbox"/> Yes			
Heat Stress	<input type="checkbox"/> Yes			
Cold Stress	<input type="checkbox"/> Yes			
Lighting/Visibility	<input type="checkbox"/> Yes			
Floor Openings	<input type="checkbox"/> Yes			
Falls	<input type="checkbox"/> Yes			
Vehicles/Traffic	<input type="checkbox"/> Yes			
Slips/Trips	<input type="checkbox"/> Yes			
Communications	<input type="checkbox"/> Yes			

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Confined Space Hazard Assessment

3.3 Hazards Around the Space

Note any hazards that need to be considered around the entry locations of the space:

Click or tap here to enter text.

4. Considerations For Safe Entry (to be used to build JHA)

Describe the steps required to prepare the space for safe entry.

Example: Once CS Permit is issued, ash needs to be wetted and removed from the floor before scaffold can be built up to the boiler tubes. Task requires FF masks with multigas cartridges, Tyvek suits and rubber boots. Re-evaluate space.

Click or tap here to enter text.

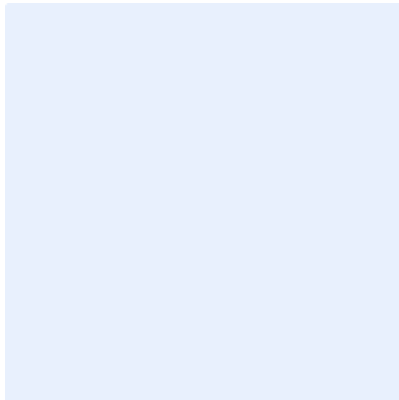
5. Pre-Entry Testing

Describe the testing expectations for the anticipated hazards and physical constraints of the space.

Click or tap here to enter text.

6. Supporting Information

Space Photo's and Descriptions (show and number all Entries). Attach PID or 1line drawing as reference.

		
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Confined Space Hazard Assessment

7. Deviations (list and describe active deviations)

Describe active deviations and reference to them. Highlight minimum expectations to use deviation.

Empty box for listing and describing active deviations.

Document Control:

Date	Name	Changes	Approval

This assessment must be reviewed by prior to any entry