HOT WORK PERMIT

Date: __________________ Start Time: _______________ Expiration Time: ______________

Description of Work: ________________________________________________________________

Building: _____________________________    Area: _______________________________

Special Precautions: ________________________________________________________________

This permit must be retained on site during the hot work activities and available for review.

Fire Prevention

Is the equipment to be used in good operating condition? ☐ ☐ ☐

Have all flammable, combustible materials within 35 feet of the proposed work area been moved or protected? ☐ ☐ ☐

Have openings in the floors and walls been protected from sparks and slag? ☐ ☐ ☐

Are fire resistant shields set up around the hot work area? ☐ ☐ ☐

If required, have permits been obtained from the local fire department? ☐ ☐ ☐

Fire System Safety

Is the sprinkler system operational? ☐ ☐ ☐

Do smoke alarms/sprinklers have to be disabled to prevent false alarms? ☐ ☐ ☐

Are there 20 lb ABC fire extinguishers present in the area? ☐ ☐ ☐

Do workers know how to initiate a fire alarm? ☐ ☐ ☐

Other Considerations

Is a fire watch present? ☐ ☐ ☐

Have other potentially affected persons been notified and a Hot Work sign posted? ☐ ☐ ☐

Does the area have adequate ventilation? ☐ ☐ ☐

Do workers have proper Personal Protection Equipment available? ☐ ☐ ☐

AUTHORIZATIONS

The permission granted by this permit is good for ONE WORK SHIFT and is valid for:

Permit Authorizing Individual: _______________ : NFPA Hot Work Safety Certification # ____________
(i.e. Building Manager)

Hot Work Operator: ________________________ : NFPA Hot Work Safety Certification # ____________

Hot Work Fire Watch: _____________________ : NFPA Hot Work Safety Certification # ____________

Click here Link to NFPA Hot Work Certificate Verification Database