

Fire Safety and Hot Work Permit Policy

<http://www.lsuhsu.edu/admin/pfm/ehs/hot.aspx>

<p>WARNING! HOT WORK IN PROGRESS WATCH FOR FIRE!</p>
<p>IN CASE OF AN EMERGENCY:</p> <p>CALL: _____</p> <p>AT: _____</p>
<p>LSUHSC Campus Police: 504-568-8999 LSUHSC Facility Services: 504-568-7715 or 504-568-7716 LSUHSC Safety Department: 504-568-2851</p>
<p>WARNING!</p>

December 13, 2016

This training provides information on prevention of fire that may result from hot work processes and to ensure an appropriate fire watch is provided when required. This training addresses:

1. What is Hot Work?
2. What is Fire Watch?
3. Types of Fire Watches.
4. Completing the Permit.
5. Permit Examples.
6. Permit Priorities / Procedures
7. Executing the Hot Work.
8. Record Retention.

Hot work is defined as any temporary operation involving open flames or producing heat, sparks or dust. This includes, but is not limited to the following which may activate the fire alarm system:

- Grinding
- Cutting
- Brazing
- Soldering
- Torch Applied Roofing
- Welding
- Dust or Mist Generation

Fire watch is used in an area that automatic fire warning systems (visual strobes or sound alarms) or fire suppression systems (sprinklers or pumps) are hindered or nonoperational over specific time periods.

The area to be watched for fire is patrolled by assigned fire watch personnel and action taken in the event of a actual fire.

Facility Services foreman and Engineering Services construction coordinators are designated as Permit Authorized individuals (PAI). The PAI supervises the hot work permit program by reviewing the permit for completion and accuracy, inspecting sites prior to the start of the hot work operations, and assign any fire watch duties and responsibilities.

Standard Fire Watch

- Assigned to hot work operations solely for watching the surrounding area to ensure a fire is not started.
- Required if combustible materials are within 35 feet of the work.
- Required when combustible materials are adjacent to the opposite side of partitions, walls, ceiling or roofs that have the potential to be ignited during hot work.
- This watch must maintain their own fire extinguisher and have authority to shut down operations if an unsafe condition exists.
- Assigned Watch individuals must be aware on how to activate the alarm should a fire start.

Roving Fire Watch

- Assigned to make rounds in a facility, or portion of the facility, when either:
 - entire fire alarm system and/or entire fire suppression system will be inoperable for more than 4 hours in a 24 hour period.
 - the fire sprinkler system has been partially impaired for more than 10 hours.
 - the duct smoke detectors or fire notification system is partially impaired for more than 8 hours.

- If a roving watch is required, the PAI will:
 - Make Facilities Service Director and EH&S Executive Director aware by submitting a Fire Safety/Hot Work permit request.
 - Facilities Service Director notifies the State Fire Marshal, the New Orleans Fire Department, alarm company and all effected personnel in writing of the fire watch.
 - Assign fire watch duties and responsibilities, including who to notify in the event of a fire or other emergency.

Roving Fire Watch (cont.)

The roving fire watch will:

- Have a designated individual in charge.
- Make rounds on designated routes in affected areas at a minimum of 1 hour intervals inspecting all spaces , including stairwells; common areas including basements, lounges, laundry rooms, and dining rooms; concealed areas, such as attics and unoccupied storage areas.
- Sign a log sheet indicating the start and end time of each round.
- Be familiar with building's notification system, fixed fire protection systems, manual and automatic detection systems, manual pull station location in affected areas, and portable fire protection systems and their current operational condition.
- Carry communication devices to maintain constant communication between each other and University Police.
- Have the ability to alert building occupants in the event of a fire.

If a fire watch is required, the PAI will:

- Validate qualified trained individuals are designated to serve as fire watchers.
- Make sure all watchers are aware of all inherent hazards at the worksite and of the hot work.
- Determine what type of fire watch is needed.
 - No Fire Watch
 - Standard Fire Watch
 - Roving Fire Watch

Accurate completion of the hot work permit is essential to safe operations. Fire watches are needed for the following systems:

- If entire fire alarm system and/or entire fire suppression system will be inoperable for more than 4 hours in a 24 hour period.
- If the fire sprinkler system has been partially impaired for more than 10 hours.
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<p>GENERAL INFORMATION</p> <p>TODAY'S DATE: _____ PROJECT NAME: _____</p> <p>LOCATION/BUILDING & FLOOR (Be Specific): _____</p> <p>DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)</p> <p><input type="checkbox"/> SPRINKLER MODIFICATION <input type="checkbox"/> OTHER (Explain Below)</p> <p><input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES _____</p> <p><input type="checkbox"/> SOLDERING _____</p> <p><input type="checkbox"/> WELDING _____</p> <p><input type="checkbox"/> CUTTING & GRINDING _____</p> <p>NAME OF PERSON(S) PERFORMING HOT WORK: _____ PHONE #: _____</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Continuously</p> <p>START TIME: _____ Date: _____ Time: _____ AM/PM</p> <p>COMPLETION TIME: _____ Date: _____ Time: _____ AM/PM</p>																																																																																																																					
<p>VERIFICATION</p> <p>The information contained in this hot work permit has been examined, the precautions checked on Hot Work Checklist will be taken to prevent fire, and permission is authorized for this work.</p> <p>SIGNED _____ (Person Performing Hot Work)</p> <p>SIGNED _____ (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)</p> <p>SIGNED _____ (For Facility Services)</p> <p>SIGNED _____ (For Environmental Health and Safety)</p>																																																																																																																					

What steps are needed for proper completion?

Step #1

The person who performs the work will initiate the process by accurately completing and submitting this permit to Facilities Services (via the Construction Coordinator for contract work) for review no later than five working days in advance of the work. ***Signature required from person performing the work.***

Step #2

The Permit Authorized Individual is responsible for reviewing the permit for completeness and accuracy, and inspecting sites prior to the start of operations. ***Signature required from PAI.***

Step #3

Permit is routed through Facility Services and EH&S for review and approval. ***Signature required from EH&S and Facilities.***

Step #4

Description of the work should be sufficient for the Electronic Control Technician to understand if flow and tamper switches or smoke detectors should be deactivated. ***Signature required if necessary from ECI.***

The three following permit examples will be reviewed for proper completion:

- (No fire watch needed)
- (Standard fire watch needed)
- (Roving fire watch needed)

Permit Example (No fire watch)

Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.

Replace bad fire sprinkler – CEB 3rd floor – Rm 304

Less than 4 hours of work

Shut down sprinkler system 3rd floor (1/4 section)

**Impaired fire sprinkler system < 10 hours.
NO HOT WORK or FIRE WATCH NEEDED**

Check the appropriate box:

- A standard fire watch is required.
- A roving fire watch is required.
- No fire watch is required.

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floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WORK IN CONFINED SPACES				Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WORK ON WALLS OR CEILING				Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FIRE WATCH/HOT WORK AREA MONITORING				Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL (e.g., local exhaust ventilation, physical barriers)								ELECTRONIC CONTROL TECHNICIAN SIGNOFF				DISABLED FIRE ALARM POINTS, FLOW and TAMPER SWITCHES				TIME SYSTEM DISABLED: Date: _____ Time: _____	AM/PM			TIME SYSTEM RE-ENABLED: Date: _____ Time: _____	AM/PM			SIGNED: _____				<i>*Note: if multiple disabling times are utilized write additional time data on back of this form.</i>			
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Permit Example (No fire watch)

LSU Health Sciences Center – Fire Safety and Hot Work Permit

Updated October 7, 2016

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Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.

Check the appropriate box:

- A standard fire watch is required.
- A roving fire watch is required.
- No fire watch is required.

HOT WORK CHECKLIST

	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REQUIREMENTS WITHIN 35 FEET OF WORK

Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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WORK IN CONFINED SPACES

Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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WORK ON WALLS OR CEILING

Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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FIRE WATCH/HOT WORK AREA MONITORING

Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL

(e.g., local exhaust ventilation, physical barriers)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: _____ Time: _____ AM/PM

TIME SYSTEM RE-ENABLED: Date: _____ Time: _____ AM/PM

SIGNED: _____

*Note: if multiple disabling times are utilized write additional time data on back of this form.

GENERAL INFORMATION

TODAY'S DATE

June 26, 2016

PROJECT NAME

CEB 3rd floor sprinkler

LOCATION/BUILDING & FLOOR (Be Specific)

CEB 3rd floor office 304

DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)

SPRINKLER MODIFICATION OTHER (Explain Below)

DUST, MIST GENERATING ACTIVITIES

SOLDERING

WELDING

CUTTING & GRINDING

NAME OF PERSON(S) PERFORMING HOTWORK

PHONE #

Greg Spears

504-628-0769

Daily Continuously

START TIME: Date: **6-27-16** Time: **10:00am** AM/PM

COMPLETION TIME: Date: **6-27-16** Time: **1:00pm** AM/PM

GENERAL INFORMATION

TODAY'S DATE

PROJECT NAME

LOCATION/BUILDING & FLOOR (Be Specific)

DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)

SPRINKLER MODIFICATION OTHER (Explain Below)

DUST, MIST GENERATING ACTIVITIES

SOLDERING

WELDING

CUTTING & GRINDING

NAME OF PERSON(S) PERFORMING HOTWORK

PHONE #

Daily Continuously

START TIME: Date: _____ Time: _____ AM/PM

COMPLETION TIME: Date: _____ Time: _____ AM/PM

VERIFICATION

The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.

SIGNED _____
(Person Performing Hot Work)

SIGNED _____
(For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)

SIGNED _____
(For Facility Services)

SIGNED _____
(For Environmental Health and Safety)

Permit Example (No fire watch)

<u>HOT WORK CHECKLIST</u>	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>REQUIREMENTS WITHIN 35 FEET OF WORK</u>			
Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>WORK IN CONFINED SPACES</u>			
Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>WORK ON WALLS OR CEILING</u>			
Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>FIRE WATCH/HOTWORK AREA MONITORING</u>			
Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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LSU Health Sciences Center – Fire Safety and Hot Work Permit
Updated October 7, 2016

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TODAY'S DATE	PROJECT NAME
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DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)	
<input type="checkbox"/> SPRINKLER MODIFICATION	<input type="checkbox"/> OTHER (Explain Below)
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<input type="checkbox"/> WELDING	
<input type="checkbox"/> CUTTING & GRINDING	
NAME OF PERSON(S) PERFORMING HOT WORK	
PHONE #	
<input type="checkbox"/> Daily <input type="checkbox"/> Continuously	
START TIME:	Date: Time: AM/PM
COMPLETION TIME:	Date: Time: AM/PM
<u>VERIFICATION</u>	
The information contained in this hot work permit has been examined, the precautions checked on Hot Work Checklist will be taken to prevent fire, and permission is authorized for this work.	
SIGNED _____ (Person Performing Hot Work)	
SIGNED _____ (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)	
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<u>HOT WORK CHECKLIST</u>	Yes	No	n/a
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ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: Time: AM/PM

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**Note: if multiple disabling times are utilized write additional time data on back of this form.*

Permit Example (No fire watch)

LSU Health Sciences Center – Fire Safety and Hot Work Permit

Updated October 7, 2016

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GENERAL INFORMATION

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Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL (e.g., local exhaust ventilation, physical barriers)			

VERIFICATION

The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.

SIGNED **Signature Here - first**
(Person Performing Hot Work)

SIGNED **Signature Here - second**
(For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)

SIGNED **Signature Here - third**
(For Facility Services)

SIGNED **Signature Here - fourth**
(For Environmental Health and Safety)

VERIFICATION

The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.

SIGNED _____
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SIGNED _____
(For Facility Services)

SIGNED _____
(For Environmental Health and Safety)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: Time: AM/PM

TIME SYSTEM RE-ENABLED: Date: Time: AM/PM

SIGNED: _____

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

Permit Example (No fire watch)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: **6/27/16** Time: **9:45** **AM**/**PM**

TIME SYSTEM RE-ENABLED: Date: **6/27/16** Time: **1:15** **AM**/**PM**

SIGNED: **Signature Here - final**

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

LSU Health Sciences Center – Fire Safety and Hot Work Permit
Updated October 7, 2016

All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.

<p>Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.</p> <p>Check the appropriate box:</p> <p><input type="checkbox"/> A standard fire watch is required.</p> <p><input type="checkbox"/> A roving fire watch is required.</p> <p><input type="checkbox"/> No fire watch is required.</p> <p>GENERAL INFORMATION</p> <p>TODAY'S DATE: _____ PROJECT NAME: _____</p> <p>LOCATION/BUILDING & FLOOR (Be Specific): _____</p> <p>DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)</p> <p><input type="checkbox"/> SPRINKLER MODIFICATION <input type="checkbox"/> OTHER (Explain Below)</p> <p><input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES _____</p> <p><input type="checkbox"/> SOLDERING _____</p> <p><input type="checkbox"/> WELDING _____</p> <p><input type="checkbox"/> CUTTING & GRINDING _____</p> <p>NAME OF PERSON(S) PERFORMING HOT WORK: _____ PHONE #: _____</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Continuously</p> <p>START TIME: _____ Date: _____ Time: _____ AM/PM</p> <p>COMPLETION TIME: _____ Date: _____ Time: _____ AM/PM</p> <p>VERIFICATION</p> <p>The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.</p> <p>SIGNED _____ (Person Performing Hot Work)</p> <p>SIGNED _____ (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)</p> <p>SIGNED _____ (For Facility Services)</p> <p>SIGNED _____ (For Environmental Health and Safety)</p>	<p>HOT WORK CHECKLIST</p> <table style="width: 100%; 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ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: _____ Time: _____ AM/PM

TIME SYSTEM RE-ENABLED: Date: _____ Time: _____ AM/PM

SIGNED: _____

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

Work shall begin at the time indicated on the permit.

Post the permit in a clearly visible location with the WARNING sign facing out for the duration of the activity.

WARNING!
HOT WORK IN
PROGRESS WATCH
FOR FIRE!

IN CASE OF AN EMERGENCY:

CALL: GREG SPIERS

AT: 504-628-0769

LSUHSC Campus Police: 504-568-8999
LSUHSC Facility Services: 504-568-7715 or
504-568-7716
LSUHSC Safety Department: 504-568-2851

WARNING!

Permit Example (Standard fire watch)

LSU Health Sciences Center – Fire Safety and Hot Work Permit																																																													
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<p>ELECTRONIC CONTROL TECHNICIAN SIGNOFF</p> <p>DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES</p> <p>TIME SYSTEM DISABLED: Date: Time: AM/PM</p> <p>TIME SYSTEM RE-ENABLED: Date: Time: AM/PM</p> <p>SIGNED: _____</p> <p><i>*Note: if multiple disabling times are utilized write additional time data on back of this form.</i></p>																																																													

Permit Example (Standard fire watch)

LSU Health Sciences Center – Fire Safety and Hot Work Permit

Updated October 7, 2016

All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.

Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.

Check the appropriate box:

- A standard fire watch is required.
- A roving fire watch is required.
- No fire watch is required.

HOT WORK CHECKLIST

	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REQUIREMENTS WITHIN 35 FEET OF WORK

Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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WORK IN CONFINED SPACES

Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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WORK ON WALLS OR CEILING

Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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FIRE WATCH/HOTWORK AREA MONITORING

Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------

Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	--------------------------	--------------------------	--------------------------

Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL

(e.g., local exhaust ventilation, physical barriers)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: _____ Time: _____ AM/PM

TIME SYSTEM RE-ENABLED: Date: _____ Time: _____ AM/PM

SIGNED: _____

*Note: if multiple disabling times are utilized write additional time data on back of this form.

GENERAL INFORMATION

TODAY'S DATE	PROJECT NAME
LOCATION/BUILDING & FLOOR (Be Specific)	
DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)	
<input type="checkbox"/> SPRINKLER MODIFICATION	<input type="checkbox"/> OTHER (Explain Below)
<input checked="" type="checkbox"/> DUST, MIST GENERATING ACTIVITIES	
<input checked="" type="checkbox"/> SOLDERING	
<input checked="" type="checkbox"/> WELDING	
<input type="checkbox"/> CUTTING & GRINDING	
NAME OF PERSON(S) PERFORMING HOTWORK	PHONE #
<input type="checkbox"/> Daily <input type="checkbox"/> Continuously	
START TIME: _____ Date: _____ Time: _____ AM/PM	
COMPLETION TIME: _____ Date: _____ Time: _____ AM/PM	

VERIFICATION

The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.

SIGNED _____
(Person Performing Hot Work)

SIGNED _____
(For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)

SIGNED _____
(For Facility Services)

SIGNED _____
(For Environmental Health and Safety)

GENERAL INFORMATION

TODAY'S DATE May 22, 2016	PROJECT NAME Dental School Mitigation
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LOCATION/BUILDING & FLOOR (Be Specific)

Clinic Bldg. - Basement

DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)

SPRINKLER MODIFICATION OTHER (Explain Below)

DUST, MIST GENERATING ACTIVITIES

SOLDERING

WELDING

CUTTING & GRINDING

NAME OF PERSON(S) PERFORMING HOTWORK Greg Spiers	PHONE # 504-628-0769
--	--------------------------------

Daily Continuously

START TIME: _____ Date: **5-27-16** Time: **8:30 am** AM/PM

COMPLETION TIME: _____ Date: **5-28-16** Time: **4:30 pm** AM/PM

Permit Example (Standard fire watch)

HOT WORK CHECKLIST	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REQUIREMENTS WITHIN 35 FEET OF WORK			
Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All wall and floor openings covered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walkways protected beneath hot work.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WORK IN CONFINED SPACES			
Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
WORK ON WALLS OR CEILING			
Combustibles moved away from other side of wall.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FIRE WATCH/HOTWORK AREA MONITORING			
Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL (e.g., local exhaust ventilation, physical barriers)			
<p>- Local ventilation required to exhaust smoke fumes out building through windows.</p> <p>- A protective shield needs to be installed to prevent passers-by to see welding operations</p>			

LSU Health Sciences Center – Fire Safety and Hot Work Permit
Updated October 7, 2016

All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.

<p>Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.</p>	
<p>Check the appropriate box:</p> <p><input type="checkbox"/> A standard fire watch is required.</p> <p><input type="checkbox"/> A roving fire watch is required.</p> <p><input type="checkbox"/> No fire watch is required.</p>	
GENERAL INFORMATION	
TODAY'S DATE	PROJECT NAME
LOCATION/BUILDING & FLOOR (Be Specific)	
DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)	
<input type="checkbox"/> SPRINKLER MODIFICATION	<input type="checkbox"/> OTHER (Explain Below)
<input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES	
<input type="checkbox"/> SOLDERING	
<input type="checkbox"/> WELDING	
<input type="checkbox"/> CUTTING & GRINDING	
NAME OF PERSON(S) PERFORMING HOT WORK	
PHONE #	
<input type="checkbox"/> Daily <input type="checkbox"/> Continuously	
START TIME:	Date: Time: AM/PM
COMPLETION TIME:	Date: Time: AM/PM
VERIFICATION	
The information contained in this hot work permit has been examined, the precautions checked on Hot Work Checklist will be taken to prevent fire, and permission is authorized for this work.	
SIGNED _____ (Person Performing Hot Work)	
SIGNED _____ (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)	
SIGNED _____ (For Facility Services)	
SIGNED _____ (For Environmental Health and Safety)	

HOT WORK CHECKLIST	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: Time: AM/PM

TIME SYSTEM RE-ENABLED: Date: Time: AM/PM

SIGNED: _____

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

Permit Example (Standard fire watch)

VERIFICATION	
The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.	
SIGNED	Signature Here - first (Person Performing Hot Work)
SIGNED	Signature Here - second (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)
SIGNED	Signature Here - third (For Facility Services)
SIGNED	Signature Here - fourth (For Environmental Health and Safety)

LSU Health Sciences Center – Fire Safety and Hot Work Permit																																																																																																																																																		
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Permit Example (Standard fire watch)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: **5/27/16** Time: **8:30** AM/PM

TIME SYSTEM RE-ENABLED: Date: **5/27/16** Time: **4:30** AM/PM

SIGNED: *Signature Here - final*

**Note: if multiple disabling times are utilized write additional time data on back of this form. Example: 5/28/16 8:30am – 4:30pm*

LSU Health Sciences Center – Fire Safety and Hot Work Permit

Updated October 7, 2016

All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.

Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.

Check the appropriate box:

- A standard fire watch is required.
- A roving fire watch is required.
- No fire watch is required.

GENERAL INFORMATION

TODAY'S DATE	PROJECT NAME
LOCATION/BUILDING & FLOOR (Be Specific)	
DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)	
<input type="checkbox"/> SPRINKLER MODIFICATION	<input type="checkbox"/> OTHER (Explain Below)
<input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES	
<input type="checkbox"/> SOLDERING	
<input type="checkbox"/> WELDING	
<input type="checkbox"/> CUTTING & GRINDING	
NAME OF PERSON(S) PERFORMING HOT WORK	PHONE #
<input type="checkbox"/> Daily <input type="checkbox"/> Continuously	
START TIME:	Date: Time: AM/PM
COMPLETION TIME:	Date: Time: AM/PM

VERIFICATION

The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.

SIGNED _____
(Person Performing Hot Work)

SIGNED _____
(For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)

SIGNED _____
(For Facility Services)

SIGNED _____
(For Environmental Health and Safety)

HOT WORK CHECKLIST

	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REQUIREMENTS WITHIN 35 FEET OF WORK

Dust, lint, debris, flammable liquids and oil deposits removed, floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WORK IN CONFINED SPACES

Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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WORK ON WALLS OR CEILING

Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------

FIRE WATCH/HOT WORK AREA MONITORING

Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL

(e.g., local exhaust ventilation, physical barriers)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: Time: AM/PM

TIME SYSTEM RE-ENABLED: Date: Time: AM/PM

SIGNED: _____

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

Work shall begin at the time indicated on the permit.

Post the permit in a clearly visible location with the WARNING sign facing out for the duration of the activity.

WARNING!
HOT WORK IN
PROGRESS WATCH
FOR FIRE!

IN CASE OF AN EMERGENCY:

CALL: GREG SPIERS

AT: 504-628-0769

LSUHSC Campus Police: 504-568-8999
LSUHSC Facility Services: 504-568-7715 or
504-568-7716
LSUHSC Safety Department: 504-568-2851

WARNING!

Permit Example (Roving fire watch)

LSU Health Sciences Center – Fire Safety and Hot Work Permit																																																																																																													
Updated October 7, 2016																																																																																																													
<p>All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.</p>																																																																																																													
<p>Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.</p> <div style="border: 1px solid red; padding: 5px; margin-top: 10px;"> <p>Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.</p> <p>Check the appropriate box:</p> <p><input type="checkbox"/> A standard fire watch is required.</p> <p><input type="checkbox"/> A roving fire watch is required.</p> <p><input type="checkbox"/> No fire watch is required.</p> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">HOT WORK CHECKLIST</th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> <th style="text-align: center;">n/a</th> </tr> </thead> <tbody> <tr> <td>Sprinklers operational during work period.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Fire Alarm system operational during work period</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Multi-purpose fire extinguisher on hand.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4">REQUIREMENTS WITHIN 35 FEET OF WORK</td> </tr> <tr> <td>Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Explosive atmosphere in area eliminated.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Combustible floors (e.g., wood, carpeting) covered with fire blankets.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>All wall and floor openings covered.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Walkways protected beneath hot work.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4">WORK IN CONFINED SPACES</td> </tr> <tr> <td>Follow LSUHSC confined space policy.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4">WORK ON WALLS OR CEILING</td> </tr> <tr> <td>Combustibles moved away from other side of wall.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4">FIRE WATCH/HOT WORK AREA MONITORING</td> </tr> <tr> <td>Standard Fire watch will be provided during and for 30 minutes after hot work is complete.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Fire watch is required for opposite side of walls, above and below floors and ceilings.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4">OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL (e.g., local exhaust ventilation, physical barriers)</td> </tr> <tr> <td colspan="4" style="height: 40px;"> </td> </tr> <tr> <td colspan="4">ELECTRONIC CONTROL TECHNICIAN SIGNOFF</td> </tr> <tr> <td colspan="4">DISABLED FIRE ALARM POINTS, FLOW and TAMPER SWITCHES</td> </tr> <tr> <td>TIME SYSTEM DISABLED:</td> <td>Date:</td> <td>Time:</td> <td>AM/PM</td> </tr> <tr> <td>TIME SYSTEM RE-ENABLED:</td> <td>Date:</td> <td>Time:</td> <td>AM/PM</td> </tr> <tr> <td colspan="4">SIGNED: _____</td> </tr> <tr> <td colspan="4"><i>*Note: if multiple disabling times are utilized write additional time data on back of this form.</i></td> </tr> </tbody> </table>	HOT WORK CHECKLIST	Yes	No	n/a	Sprinklers operational during work period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Alarm system operational during work period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Multi-purpose fire extinguisher on hand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	REQUIREMENTS WITHIN 35 FEET OF WORK				Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WORK IN CONFINED SPACES				Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WORK ON WALLS OR CEILING				Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FIRE WATCH/HOT WORK AREA MONITORING				Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL (e.g., local exhaust ventilation, physical barriers)								ELECTRONIC CONTROL TECHNICIAN SIGNOFF				DISABLED FIRE ALARM POINTS, FLOW and TAMPER SWITCHES				TIME SYSTEM DISABLED:	Date:	Time:	AM/PM	TIME SYSTEM RE-ENABLED:	Date:	Time:	AM/PM	SIGNED: _____				<i>*Note: if multiple disabling times are utilized write additional time data on back of this form.</i>			
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Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.

Fire Control panel needs replacing. Duration = 3 days

Residence Hall 2nd floor Fire Control Panel room
All floors effected in building.

Entire fire detection system > than 4 hours.

HOT WORK NOT REQUIRED
ROVING FIRE WATCH REQUIRED

Check the appropriate box:

A standard fire watch is required.

A roving fire watch is required.

No fire watch is required.

Permit Example (Roving fire watch)

LSU Health Sciences Center – Fire Safety and Hot Work Permit

Updated October 7, 2016

All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.

Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.

Check the appropriate box:

- A standard fire watch is required.
- A roving fire watch is required.
- No fire watch is required.

HOT WORK CHECKLIST

- | | Yes | No | n/a |
|--|--------------------------|--------------------------|--------------------------|
| Sprinklers operational during work period. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire Alarm system operational during work period | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Multi-purpose fire extinguisher on hand. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

REQUIREMENTS WITHIN 35 FEET OF WORK

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Explosive atmosphere in area eliminated. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Combustible floors (e.g., wood, carpeting) covered with fire blankets. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| All wall and floor openings covered. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Walkways protected beneath hot work. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

WORK IN CONFINED SPACES

- | | | | |
|--------------------------------------|--------------------------|--------------------------|--------------------------|
| Follow LSUHSC confined space policy. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------------------|--------------------------|--------------------------|--------------------------|

WORK ON WALLS OR CEILING

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| Combustibles moved away from other side of wall. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|--------------------------|

FIRE WATCH/HOTWORK AREA MONITORING

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| Standard Fire watch will be provided during and for 30 minutes after hot work is complete. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire watch is required for opposite side of walls, above and below floors and ceilings. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL

(e.g., local exhaust ventilation, physical barriers)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES
 TIME SYSTEM DISABLED: Date: _____ Time: _____ AM/PM
 TIME SYSTEM RE-ENABLED: Date: _____ Time: _____ AM/PM

SIGNED: _____
 *Note: if multiple disabling times are utilized write additional time data on back of this form.

GENERAL INFORMATION

TODAY'S DATE	PROJECT NAME
LOCATION/BUILDING & FLOOR (Be Specific)	
DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)	
<input type="checkbox"/> SPRINKLER MODIFICATION	<input checked="" type="checkbox"/> OTHER (Explain Below)
<input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES	
<input type="checkbox"/> SOLDERING	
<input type="checkbox"/> WELDING	
<input type="checkbox"/> CUTTING & GRINDING	
NAME OF PERSON(S) PERFORMING HOTWORK	PHONE #
<input type="checkbox"/> Daily <input type="checkbox"/> Continuously	
START TIME: _____ Date: _____ Time: _____ AM/PM	
COMPLETION TIME: _____ Date: _____ Time: _____ AM/PM	

VERIFICATION

The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.

SIGNED _____
 (Person Performing Hot Work)

SIGNED _____
 (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)

SIGNED _____
 (For Facility Services)

SIGNED _____
 (For Environmental Health and Safety)

GENERAL INFORMATION

TODAY'S DATE August 1, 2016	PROJECT NAME Fire Control Panel - RH
---------------------------------------	--

LOCATION/BUILDING & FLOOR (Be Specific)
Residence Hall – 2nd floor Fire control panel

DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> SPRINKLER MODIFICATION | <input checked="" type="checkbox"/> OTHER (Explain Below) |
| <input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES | Fire Control panel |
| <input type="checkbox"/> SOLDERING | replacement due to |
| <input type="checkbox"/> WELDING | lightning strike |
| <input type="checkbox"/> CUTTING & GRINDING | |

NAME OF PERSON(S) PERFORMING HOTWORK Greg Spiers	PHONE # 504-628-0769
--	--------------------------------

Daily Continuously

START TIME: _____ Date: **8-2-16** Time: **6:30 am** AM/PM

COMPLETION TIME: _____ Date: **8-4-16** Time: **4:30 pm** AM/PM

Permit Example (Roving fire watch)

<u>HOT WORK CHECKLIST</u>	Yes	No	n/a
Sprinklers operational during work period.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>REQUIREMENTS WITHIN 35 FEET OF WORK</u>			
Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>WORK IN CONFINED SPACES</u>			
Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>WORK ON WALLS OR CEILING</u>			
Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>FIRE WATCH/HOTWORK AREA MONITORING</u>			
Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL</u> (e.g., local exhaust ventilation, physical barriers)			

LSU Health Sciences Center – Fire Safety and Hot Work Permit
Updated October 7, 2016

All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.

<p>Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.</p> <p> </p> <p> </p> <p> </p>	
<p>Check the appropriate box:</p> <p><input type="checkbox"/> A standard fire watch is required.</p> <p><input type="checkbox"/> A roving fire watch is required.</p> <p><input type="checkbox"/> No fire watch is required.</p>	
<p><u>GENERAL INFORMATION</u></p> <p>TODAY'S DATE: _____ PROJECT NAME: _____</p> <p>LOCATION/BUILDING & FLOOR (Be Specific): _____</p> <p>DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)</p> <p><input type="checkbox"/> SPRINKLER MODIFICATION <input type="checkbox"/> OTHER (Explain Below)</p> <p><input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES _____</p> <p><input type="checkbox"/> SOLDERING _____</p> <p><input type="checkbox"/> WELDING _____</p> <p><input type="checkbox"/> CUTTING & GRINDING _____</p> <p>NAME OF PERSON(S) PERFORMING HOT WORK: _____ PHONE #: _____</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Continuously</p> <p>START TIME: _____ Date: _____ Time: _____ AM/PM</p> <p>COMPLETION TIME: _____ Date: _____ Time: _____ AM/PM</p>	
<p><u>VERIFICATION</u></p> <p>The information contained in this hot work permit has been examined, the precautions checked on Hot Work Checklist will be taken to prevent fire, and permission is authorized for this work.</p> <p>SIGNED _____ (Person Performing Hot Work)</p> <p>SIGNED _____ (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)</p> <p>SIGNED _____ (For Facility Services)</p> <p>SIGNED _____ (For Environmental Health and Safety)</p>	

<u>HOT WORK CHECKLIST</u>	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>REQUIREMENTS WITHIN 35 FEET OF WORK</u>			
Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>WORK IN CONFINED SPACES</u>			
Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>WORK ON WALLS OR CEILING</u>			
Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>FIRE WATCH/HOTWORK AREA MONITORING</u>			
Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL</u> (e.g., local exhaust ventilation, physical barriers)			

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: _____ Time: _____ AM/PM

TIME SYSTEM RE-ENABLED: Date: _____ Time: _____ AM/PM

SIGNED: _____

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

Permit Example (Roving fire watch)

VERIFICATION	
The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.	
SIGNED	<i>Signature Here - first</i> (Person Performing Hot Work)
SIGNED	<i>Signature Here - second</i> (For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)
SIGNED	<i>Signature Here - third</i> (For Facility Services)
SIGNED	<i>Signature Here - fourth</i> (For Environmental Health and Safety)

LSU Health Sciences Center – Fire Safety and Hot Work Permit							
Updated October 7, 2016							
All temporary operations performed by LSUHSC or contractors producing heat, flames, sparks or dust (e.g., brazing, cutting, grinding, soldering or welding) and work requiring the shutdown of sprinkler systems and/or fire alarms, or that could possibly activate the fire alarm system (dust/mist generating activities) require a completed and approved permit.							
Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.							
<table border="1" style="width: 100%; height: 100px;"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>							
Check the appropriate box:							
<input type="checkbox"/> A standard fire watch is required. <input type="checkbox"/> A roving fire watch is required. <input type="checkbox"/> No fire watch is required.							
GENERAL INFORMATION							
TODAY'S DATE	PROJECT NAME						
LOCATION/BUILDING & FLOOR (Be Specific)							
DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)							
<input type="checkbox"/> SPRINKLER MODIFICATION <input type="checkbox"/> OTHER (Explain Below) <input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES <input type="checkbox"/> SOLDERING <input type="checkbox"/> WELDING <input type="checkbox"/> CUTTING & GRINDING							
NAME OF PERSON(S) PERFORMING HOT WORK							
PHONE #							
<input type="checkbox"/> Daily <input type="checkbox"/> Continuously START TIME: Date: Time: AM/PM COMPLETION TIME: Date: Time: AM/PM							
VERIFICATION							
The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.							
SIGNED							
(Person Performing Hot Work)							
SIGNED							
(For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)							
SIGNED							
(For Facility Services)							
SIGNED							
(For Environmental Health and Safety)							
HOT WORK CHECKLIST							
Yes	No	n/a					
Sprinklers operational during work period.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Fire Alarm system operational during work period							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Multi-purpose fire extinguisher on hand.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
REQUIREMENTS WITHIN 35 FEET OF WORK							
Dust, lint, debris, flammable liquids and oil deposits removed, floors swept clean.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Explosive atmosphere in area eliminated.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Combustible floors (e.g., wood, carpeting) covered with fire blankets.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
All wall and floor openings covered.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Walkways protected beneath hot work.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
WORK IN CONFINED SPACES							
Follow LSUHSC confined space policy.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
WORK ON WALLS OR CEILING							
Combustibles moved away from other side of wall.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
FIRE WATCH/HOT WORK AREA MONITORING							
Standard Fire watch will be provided during and for 30 minutes after hot work is complete.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Fire watch is required for opposite side of walls, above and below floors and ceilings.							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL (e.g., local exhaust ventilation, physical barriers)							
ELECTRONIC CONTROL TECHNICIAN SIGNOFF							
DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES							
TIME SYSTEM DISABLED:	Date:	Time: AM/PM					
TIME SYSTEM RE-ENABLED:	Date:	Time: AM/PM					
SIGNED:							
*Note: if multiple disabling times are utilized write additional time data on back of this form.							

Permit Example (Roving fire watch)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: **8/2/16** Time: **6:30** AM/PM

TIME SYSTEM RE-ENABLED: Date: **8/4/16** Time: **4:30** AM/PM

SIGNED: *Signature Here - final*

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

LSU Health Sciences Center – Fire Safety and Hot Work Permit

Updated October 7, 2016

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Indicate if the fire alarm system or fire sprinkler system will be shut down or impaired. If so, explain what parts of the building are impacted and for how long.

Check the appropriate box:

- A standard fire watch is required.
- A roving fire watch is required.
- No fire watch is required.

GENERAL INFORMATION

TODAY'S DATE	PROJECT NAME
LOCATION/BUILDING & FLOOR (Be Specific)	
DESCRIPTION OF WORK BEING PERFORMED (Be Specific and check all that apply)	
<input type="checkbox"/> SPRINKLER MODIFICATION	<input type="checkbox"/> OTHER (Explain Below)
<input type="checkbox"/> DUST, MIST GENERATING ACTIVITIES	
<input type="checkbox"/> SOLDERING	
<input type="checkbox"/> WELDING	
<input type="checkbox"/> CUTTING & GRINDING	
NAME OF PERSON(S) PERFORMING HOT WORK	PHONE #
<input type="checkbox"/> Daily <input type="checkbox"/> Continuously	
START TIME:	Date: Time: AM/PM
COMPLETION TIME:	Date: Time: AM/PM

VERIFICATION

The information contained in this hot work permit has been examined, the precautions checked on HotWork Checklist will be taken to prevent fire, and permission is authorized for this work.

SIGNED _____
(Person Performing Hot Work)

SIGNED _____
(For Permit Authorized Individual, i.e. Construction Coordinator/Foreman)

SIGNED _____
(For Facility Services)

SIGNED _____
(For Environmental Health and Safety)

HOT WORK CHECKLIST

	Yes	No	n/a
Sprinklers operational during work period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Alarm system operational during work period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multi-purpose fire extinguisher on hand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REQUIREMENTS WITHIN 35 FEET OF WORK

Dust, lint, debris, flammable liquids and oil deposits removed; floors swept clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosive atmosphere in area eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible floors (e.g., wood, carpeting) covered with fire blankets.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remove flammable and combustible material where possible otherwise protect with fire blankets, guards, or metal shields.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All wall and floor openings covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walkways protected beneath hot work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WORK IN CONFINED SPACES

Follow LSUHSC confined space policy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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WORK ON WALLS OR CEILING

Combustibles moved away from other side of wall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------

FIRE WATCH/HOT WORK AREA MONITORING

Standard Fire watch will be provided during and for 30 minutes after hot work is complete.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is trained in use of fire extinguishers and familiar in procedures for sounding building fire alarm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire watch is required for opposite side of walls, above and below floors and ceilings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHER PRECAUTIONS TAKEN TO PROTECT LSUHSC PERSONNEL

(e.g., local exhaust ventilation, physical barriers)

ELECTRONIC CONTROL TECHNICIAN SIGNOFF

DISABLED FIRE ALARM POINTS/FLOW and TAMPER SWITCHES

TIME SYSTEM DISABLED: Date: Time: AM/PM

TIME SYSTEM RE-ENABLED: Date: Time: AM/PM

SIGNED: _____

**Note: if multiple disabling times are utilized write additional time data on back of this form.*

Work shall begin at the time indicated on the permit.

Post the permit in a clearly visible location with the WARNING sign facing out for the duration of the activity.

WARNING!
HOT WORK IN
PROGRESS WATCH
FOR FIRE!

IN CASE OF AN EMERGENCY:

CALL: GREG SPIERS

AT: 504-628-0769

LSUHSC Campus Police: 504-568-8999
LSUHSC Facility Services: 504-568-7715 or
504-568-7716
LSUHSC Safety Department: 504-568-2851

WARNING!

Point Of Contacts:

Supervisor

Building Services Manager

Director, Facility Services

Executive Director, EHS

EHS Staff

Execute the Hot Work by:

- Beginning work at the time indicated on permit.
- Post the permit in a clearly visible location with its Warning Sign facing out for the duration of the activity.
- Prior to starting the hot work, the PAI and person performing the hot work shall inspect the site and confirm adequate procedures are in place given the hazards. Smoke detectors in the hot work area should be covered and/or disabled for duration of hot work period to prevent false alarms.
- Prior to work, Electronic Control Technician(s) will log the time the fire alarm system was disabled/re-enabled and which specific devices were disabled.
- Upon completion of the hot work, the Technician will log the time the system was re-enabled.
- A copy of the permit shall be filed by the Electronic Control shop and kept for a period of at least one year.

The Director of Facility Services will maintain all records, to include log sheets, associated with the fire watch.

If you have questions or comments, please contact James J. Davis III, Safety Officer, at (504) 318-4952 or jdavis3@lsuhsc.edu.