|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. | Unsafe conditions for removing an entrance cover are eliminated. |  | Yes | No |
|  | | | | |
| 2. | Entrance openings are guarded to prevent workers and objects from falling into the space. |  | Yes | No |
|  | | | | |
| 3. | Oxygen content tested and suitable for entry. |  | Yes | No |
|  | | | | |
| 4. | Flammable gases and vapors tested and space suitable for entry. |  | Yes | No |
|  | | | | |
| 5. | Potential toxic air contaminants tested and space suitable for entry. |  | Yes | No |
|  | | | | |
| 6. | Forced-air ventilation has eliminated any hazardous atmosphere. |  | Yes | No |
|  | | | | |
| 7. | Forced-air ventilation ventilates the immediate area where work is performed. |  | Yes | No |
|  | | | | |
| 8. | Forced-air ventilation continues until all workers have left the space. |  | Yes | No |
|  | | | | |
| 9. | All test results are documented. |  | Yes | No |
|  | | | | |
| 10. | Air supply for the forced-air ventilation is clean and does not increase hazards in the space. |  | Yes | No |
|  | | | | |
| 11. | Atmosphere inside the space is periodically tested as necessary. |  | Yes | No |
|  | | | | |
| 12. | The employer has taken the required pre-entry procedures through a written certification process. |  | Yes | No |
|  | | | | |
| 13. | Certification includes date, location of space and the signature of the certifying person. |  | Yes | No |
|  | | | | |
| 14. | The emergency phone number list has been established. |  | Yes | No |
|  | | | | |
| 15. | The employer has verified that the space is safe for entry. |  | Yes | No |
|  | | | | |

Contact rescue personnel by local fire department in the event of an emergency.

Notice: If any of the above questions are answered "no" do not enter. Contact your immediate supervisor.

|  |  |
| --- | --- |
| Job Location: |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| *Entry Supervisor/Foreman Signature* |  | *Date* |  |

| **Revision / Review History** | | | |
| --- | --- | --- | --- |
| **Revision** | **Date** | **Authorized By** | **Changes** |
| 1 | 9/11/2000 | Safety Director | New Program |
| 2 | 1/15/2001 | Safety Director | Annual Review |
| 3 | 1/10/2002 | Safety Director | Annual Review |
| 4 | 1/11/2003 | Safety Director | Annual Review |
| 5 | 1/15/2004 | Safety Director | Annual Review |
| 6 | 1/10/2005 | Safety Director | Annual Review |
| 7 | 6/27/2006 | Safety Director | Annual Review |
| 8 | 9/6/2007 | Safety Director | Annual Review |
| 9 | 8/23/2010 | Safety Director | Annual Review |
| 10 | 10/3/2012 | Safety Director | Annual Review |
| 11 | 11/10/2012 | Safety Director | Annual Review |
| 12 | 9/25/2013 | Safety Director | Annual Review |
| 13 | 6/30/2016 | Safety Director | Annual Review-Updated and new format |
| 13 | 6/30/2017 | Safety Director | Annual Review |
| 13 | 7/01/2018 | Safety Director | Annual Review |
| 13 | 6/7/2019 | Safety Director | Annual Review |