



## **DOCUMENT NUMBER**

**ALASALA CO.  
-16 A- HSE- 002**

## **DOCUMENT TITLE**

**H.S.E  
PERMIT TO WORK SYSTEM**

<b>ISSUED BY :</b>	<b>APPROVED BY :</b>	<b>ISSUE</b>	<b>REVISIO N NO.</b>	<b>PAGE NO.</b>
<b>NAME : SIGN : DATE :</b>	<b>NAME : SIGN : DATE :</b>	<b>1</b>	<b>0</b>	<b>1 OF 12</b>



## **CONTENTS**

**1.0 PURPOSE**

**2.0 SCOPE**

**3.0 RESPONSIBILITIES**

**4.0 APPROACH**

**5.0 ASSOCIATED DOCUMENTS**

**6.0 FORMS**



## **1.0 PURPOSE**

The Work Permit System is a means whereby written permission has to be obtained before certain work can be carried out. It also serves two other purposes:

- 1.1 To specify conditions and improve limitations under which work could be carried out, otherwise be potentially hazardous, need to be carried out.
- 1.2 To control entry into confined spaces, which might contain, or have contained, a hazardous atmosphere or hazardous materials. Also, new plant/equipment or atmospheres that could have oxygen deficiency such as leak testing with an inert gas.

*The Radiography activities are covered in a separate procedures.*

## **2.0 SCOPE**

This ALASALA Co. procedure is applicable to all situations where HSE sector / Department Management Team is responsible for the implementation of a Safety Management System at the Fabrication Project or other facility that belongs to the Company or a Client.

## **3.0 RESPONSIBILITIES**

The H.S.E Management is responsible for its authorization, implementation and liaison with the Client.

The HSE Manager will carry out periodic checks of work sites to ensure adherence to the conditions and safe working practices as laid down in the Work Permit.

## **4.0 APPROACH**

The following are the most common work situations for which Permits are required:

### **4.1 Excavations**

Excavation Permits are required wherever cables, piping, etc. may be present under the area to be excavated.

If in doubt **contact the Electrical Department** .

### **4.2 Confined Space Entry Permit**

The basic intent of a Confined Space Entry Permit is to ensure the safety of workers who will enter into confined spaces and pre-plan how to rescue workers from the space when it becomes necessary to do so.

Definitions of a confined space are an area where work must be carried out under any of the following circumstances: -



- Existing ventilation is insufficient to remove dangerous air concentrations and/or oxygen deficiency may exist or develop
- Ready access or egress for the removal of a suddenly disabled worker is difficult due to location and/or size of entryway. Examples of confined space are: Tanks, vessels, pipelines, boilers, ducts, sewers and any other similar-type locations.
- An atmosphere, Dangerous Air Concentration, presenting a threat of causing death, injury, acute illness or disablement due to the presence of flammable, toxic or other dangerous substance.

Confined Space Entry General Requirements: -

- i) A Confined Space Entry Permit must be prepared and approved before entry can be made.
- ii) The Entry Permit shall be valid only until the end of a working day / shift.
- iii) Before entry, the confined space must be emptied, flushed or otherwise purged of flammable, toxic and other dangerous substances.
- iv) All lines that can convey flammable, toxic or other incapacitating material into a confined space, and all electrical equipment which could present a hazard to workers inside the confined space, must be positively de-energized, isolated by a positive means such as blinding or double block & bleed.
- v) Entry into a confined space shall be prohibited until initial testing of the atmosphere is done from the outside to ensure that the atmosphere is safe. Testing must be continuous during the time that a person is in the confined space.
- vi) Person entering a confined space shall wear a safety harness with lifeline attached at all times.
- vii) A stand-by person or persons (each job will determine the number necessary), properly instructed and trained in emergency procedures, must be posted at the confined space entrance at all times when someone is inside.
- viii) A stand-by person may enter a confined space ONLY after alerting at least one additional person outside the confined space of the existence of the emergency and of the stand-by person's intent to enter the confined space.

#### **4.3 Hot Work Permit**

The basic intent of a Hot Work and Permit is to control the conditions under which sources of ignition, such as open flames, welding arcs, and electrical sparks are kept away from sources of fuel such as gasoline (petrol), paper, wood, and other flammable and combustible materials.

Permits establish the process by which the proprietor of the work, the responsible person, is assured that conditions are such that the work can be performed safely.





#### Hot Work Permit General Requirements:-

- i) Permits must be obtained for hot work and open flame ***SPECIFIC*** activities.
- ii) Permits are not required for **NORMAL** hot work such as fabrication of new facilities within the Project.
- iii) Permits are valid for a 24-hour shift provided conditions remain unchanged unless otherwise stated. Hot work permits are sanctioned daily by the performing authority and the operating authority, in consultation with the HSE Department.
- iv) Personnel who are knowledgeable in the hazards that are associated with the work being performed shall only perform hot work/open flame activities.
- v) After work is complete, areas shall be cleaned of waste and unused materials. No designated hot work/open flame area shall be left unattended until all ignition sources are extinguished.

#### **4.4 Work Over the Side Permit**

The basic intent of a Work Over the Side Permit is to ensure the safety of workers who will work over water and pre-plan how to rescue workers from the Sea should it become necessary to do so.

Definitions of a Work Over the Side is where work must be carried out over the water either on scaffolding or in a personnel basket.

#### Work Over the Side General Requirements: -

- i) A Work Over the Side Permit must be prepared and approved before work over water can be started.
- ii) The Permit shall be valid **only until** the end of a working day / shift.
- iii) The validity of the Permit is conditional to day light hours **ONLY**.
- iv) **Work at night is strictly prohibited.**
- v) A Projects Vessel or a Zodiac with rescue crew must be in attendance throughout the duration of work and must keep visual watch and Radio Communication watch.
- vi) Persons working Over the Side shall wear a floatation Work Vest in addition to safety harness with lifeline attached at all times.
- vii) A stand-by person or persons (each job will determine the number necessary), properly instructed and trained in **Man Overboard Procedures**, must be posted at the work site **at all times** when someone is working Over the Sea.
- viii) A stand-by person must be in possession of Radio Communication and to maintain contact with the rescue crew in the Zodiac or the Projects Vessel.
- ix) Safe means of access and ingress must be provided for workers attempting to work on overboard scaffolding.
- xi) The wind speed must be taken into consideration throughout the duration of work.

**work must be stopped and men evacuated to a safe location if the wind speed exceed Twenty (20) Knots / hour.**



#### **4.5 Equipment De-energizing/Isolation Permit**

The basic intent of an Equipment De-energizing permit is to protect personnel and equipment from injury or damage due to:

- electrical shock
- inadvertent movement of power driven equipment
- release/exposure to chemicals, steam, flammable liquids previously contained in piping, vessels and other similar equipment.

Equipment De-energizing/Isolation Permit General Requirements:-

- i) An Equipment De-energizing/Isolation Permit is required in all circumstances where electrical, steam, air, hydraulic, or other type of power may endanger personnel.
- ii) All electrical equipment shall be discharged of any residual electrical charge before performing any service work.
- iii) Isolations shall be made at the main power supply to the equipment and the local control switch. Because isolation of operating switches may leave other portions of the equipment energized, in all situations you must "try" equipment to make certain that it will not start or operate.
- iv) A physical disconnect of electrical feeder lines shall be made in all instances where no common feeder switch is provided to the equipment. The disconnect shall be made at the feeder line source.
- v) Power sources other than electricity such as steam, air, hydraulic, etc. shall be disconnected, blinded, plugged, or some other positive means taken to prevent contact between employees and the power source.
- vi) Do not disconnect switches when they are energized and under load, arcing phases may occur with explosive results.
- vii) Where a fuse must be pulled, the supply (line) end should be pulled first and should be inserted first, never the neutral (load) side.
- viii) Isolation utilizing a single block valve is NOT allowed as adequate isolation. Proper isolation utilizing block valves requires the use of a double block (2 valves) with a bleeder point established in between.
- ix) Catch pans are to be used to collect liquids that are released, whenever physical disconnect style isolation will involve oil or other hydrocarbon contaminated material.

#### **5.0 ASSOCIATED DOCUMENTS**

ALASALA Co. Procedure # PTJ-600M-SAF-016, Welding & Cutting Operations



**Hot Work Permit**

<b>Section 1: Performing Authority</b>		
Initiator Name: _____	Dept.: _____	
Post: _____		
Job Performance Name: _____	Co./Dept.: _____	
Post: _____		
Plant/Location: _____	Equipment No. & Description: _____	
Work Force No ( ) workers, equipped with the following machines & tools: ----- -----		
Work Description:----- ----- -----		
<b>Section 2: Area Authority</b>		
Safety Precautions & Equipment Requirements(Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> )		
<input type="checkbox"/> Vessel/Confined space entry	<input type="checkbox"/> Non Sparking/special tools	
<input type="checkbox"/> Mechanical Isolation	<input type="checkbox"/> Equipment locking & tagging	
<input type="checkbox"/> Electrical Isolation	<input type="checkbox"/> Pressure release	
<input type="checkbox"/> Excavation	<input type="checkbox"/> Warning sign posting &	
Barricading	<input type="checkbox"/> Fire fighting equipment	
<input type="checkbox"/> Work over the side		
<input type="checkbox"/> Gas freeing		
<b>Additional Safety Precautions:</b>		
<input type="checkbox"/> Helmet	<input type="checkbox"/> Face Shield	<input type="checkbox"/> Goggles
<input type="checkbox"/> Dust mask	<input type="checkbox"/> Respirator	<input type="checkbox"/> Breathing apparatus
<input type="checkbox"/> Safety Belt	<input type="checkbox"/> Safety harness	<input type="checkbox"/> Chemical suit
<input type="checkbox"/> Chemical Gloves	<input type="checkbox"/> Disposable coverall	<input type="checkbox"/> Cotton gloves
<input type="checkbox"/> Ear Muffs	<input type="checkbox"/> Stand by watch	
<b>Additional Precautions:</b> ----- ----- -----		
<b>Gas Test:</b> Continuous monitoring requirement: (Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> )		
Initial gas test performed by Name: _____	Signature: _____	
Combustible Gas: _____	Time: _____ Hrs Date _____	
<b>Section 3: Declaration</b>		
I have read, understood and shall comply with the work instructions/safety requirements		
<b>Supervisor Signature:</b> _____	<b>Performer Signature:</b> _____	





### **Excavation Permit**

<b>Section 1: Performing Authority</b>			
<u>Initiator Name:</u>		<u>Function:</u>	<u>Dept.:</u>
<u>Job Performance Name:</u>		<u>Function:</u>	<u>Co./Dept.:</u>
<u>Exact Location Area:</u>			
<u>Depth:</u>	<u>Width:</u>	<u>Length:</u>	
Drawing/sketch attached	(Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> )		
<b>Section 2: Verification</b>			
This is to certify that the area/location of excavations is clear from underground services and thus work can be carried out safely:			
<u>Elect./instr. Section name:</u>		<u>Signature:</u>	<u>Date:</u>
<u>Mech./Civil section name:</u>		<u>Signature:</u>	<u>Date:</u>
<u>Telecom section name:</u>		<u>Signature:</u>	<u>Date:</u>
<b>Section 3: Area Authority (HSE. Eng./Sup.)</b>			
Safety Precautions & Requirements (Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> )			
<input type="checkbox"/> Safe means of access/ingress	<input type="checkbox"/> Internal support	<input type="checkbox"/> Barriers	<input type="checkbox"/> Warning signs (reflective)
<input type="checkbox"/> Flashing lights	<input type="checkbox"/> Gas freeing	<input type="checkbox"/> Road Closure	<input type="checkbox"/> Hand tools
		<input type="checkbox"/> Power tools	<input type="checkbox"/> standby watch
		<input type="checkbox"/> personal Prot. Eqpt.	
<b>Additional Safety Precautions:</b>			
-----			
<b>Section 4: Declaration</b>			
I have read and understood the work instructions and safety requirements			
<u>Initiator Signature:</u>		<u>Performer Signature:</u>	
<b>Section 5: Approval</b>			
<u>Permit is valid from:</u>	<u>Hrs to:</u>	<u>Hrs</u>	<u>Date:</u>
<u>Area Authority (HSE. MGR.) Name:</u>			<u>Signature:</u>
<b>Section 6: Work Completion</b>			
<u>The area/location has been restored to normal &amp; safe condition at:</u>			<u>Hrs Date:</u>
<u>Initiator Signature:</u>		<u>Performer Signature:</u>	
<b>Section 7: Work Acceptance</b>			
<u>The equipment/location has been received safe for normal operation at:</u>			<u>Hrs Date:</u>
<u>Area Authority (HSE) Sign:</u>	<u>Time:</u>	<u>Hrs Date:</u>	
<b>Section 8: Extension :</b>			
<u>Date</u>			
<u>From Hrs</u>	<u>To Hrs</u>		
<u>HSE Sign.</u>			
<b>Distribution:</b>			
<u>Original: Job Performer</u>		<u>2<sup>nd</sup> Copy: Initiator</u>	
<u>1<sup>st</sup> Copy: Area Authority</u>		<u>3<sup>rd</sup> Copy: Safety</u>	





<b>Section 4: Approval</b>				
Permit is valid from:	Hrs to	Hrs	Date:	
Area Authority:	Name		Signature	
<b>Section 5: Work Completion</b>				
The location/equipment has been restored to normal & safe condition at:				Hrs
				Date
<b>Supervisor Signature:</b>		<b>Performer Signature:</b>		
<b>Section 6: Work Acceptance</b>				
The equipment/location has been received safe for normal operation				
Area Authority	Sign:	Time:	Hrs	Date:
<b>Section 7: Extension for cold work only</b>				
Date				
From Hrs				
To Hrs				
Signature				
<b>Distribution:</b>				
Original: Job Performer		2 <sup>nd</sup> Copy: Initiator		
1 <sup>st</sup> Copy: Area Authority		3 <sup>rd</sup> Copy: Safety		



## Confined Space Entry Permit

<b>Section 1: Performing Authority</b>			
<u>Initiator Name:</u>		<u>Function:</u>	<u>Dept.:</u>
<u>Job Performance Name:</u>		<u>Function:</u>	<u>Co./Dept.:</u>
<u>Plant/Location:</u>		<u>Equipment No. &amp; Description:</u>	
Work Force No. ( ) workers, equipped with the following machines & tools:			
-----			
-----			
-----			
<u>Work Description:</u> -----			
-----			
-----			
<b>Section 2: Safety Requirements Precautions Area Authority (Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>)</b>			
<input type="checkbox"/> Mechanical Isolation certificate	<input type="checkbox"/> Electrical Isolation certificate	<input type="checkbox"/> Vessel Depressurized & Flushed	<input type="checkbox"/> Scaffolding & Means of access
<input type="checkbox"/> Lighting/illumination	<input type="checkbox"/> Emergency/Rescue Equip.	<input type="checkbox"/> Stand by watch	<input type="checkbox"/> Non sparking/special tools
	<input type="checkbox"/> Means of ventilation	<input type="checkbox"/> Personal O <sub>2</sub> /gas monitor	
<u>Additional Safety Precautions:</u> -----			
-----			
<b>Gas Test: Continuous monitoring requirement: (Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>)</b>			
Initial gas test performed by, Name:		Signature:	
Combustible Gas:	Oxygen Content:	Time:	Hrs Date:
<b>Section 3: Declaration</b>			
I have read and understood the work instructions and safety requirements			
<b>Initiator Signature:</b>		<b>Performer Signature:</b>	
<b>Section 4: Approval</b>			
Permit is valid from:	Hrs to	Hrs	Date:
Area Authority Name:		Signature:	
<b>Section 5: Work Completion</b>			
The location/equipment has been restored to normal & safe condition at:			Hrs Date:
<b>Initiator Signature:</b>		<b>Performer Signature:</b>	
<b>Section 6: Work Acceptance</b>			
The area/location/equipment has been received safe for normal operation			
Area Authority	Sign:	Time:	Hrs Date:
<b>Distribution:</b>			
Original: Job Performer	2 <sup>nd</sup> Copy: Initiator		
1 <sup>st</sup> Copy: Area Authority	3 <sup>rd</sup> Copy: Safety		