**Unity Area Regional Recycling Center**

95 Leonard Rd Phone: (207)568-3117

Thorndike, ME 04986 Fax: (207)568-3319

E-mail: uarrc@uninets.net www.uarrc.org

Part 1 of 2 Issue Date\_\_\_\_\_\_\_\_\_\_\_\_ Permit # \_\_\_\_\_\_\_\_\_

|  |
| --- |
| Welding and Torch Cutting Permit |

|  |  |
| --- | --- |
| Building/ Area: | Date: |
| Department: | Floor/Level |

Description of Work to be done:

|  |  |
| --- | --- |
| Time Started: | Time Complete: |
| Contractor to be doing “Hot Work”: | Fire Watch Staff Member: |

**Cutting and Welding Safety Checklist**

* Hot Work permit posted on site.(1 Copy)
* Equipment and hoses free from damage and leaks. Cylinders supported.
* Work area clear of all combustibles within a radius of **35’**. Cover holes and openings with fire retardant materials.
* Conveyors and suction systems in the area must be shut down.
* Area wet down except when arc welding.
* Lower areas wet down thoroughly.

**During Cutting and Welding**

* Fire Watch has firefighting equipment and is train on its use.
* Fire watch knows fire notification procedures.

**After Cutting and Welding**

* Area wet down thoroughly.
* Equipment stored properly.
* Fire watch is posted on site for 30 minutes after cutting and welding is done.
* File permit with Safety Committee.

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Permit Issued by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor to Complete Part 2 of 2 Issue Date\_\_\_\_\_\_\_\_\_\_\_\_ Permit # \_\_\_\_\_\_\_\_\_

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| --- |
| Welding and Torch Cutting Permit |

Supervisor Responsibility

* Verify precautions listed on part 1 of permit.
* Complete parts 1 and 2.
* Issue Part 1 to staff member doing hot work and post on site and retain part 2.
* After watch is complete, verify area is safe and retain Part 1 and attach.

|  |
| --- |
| Job Description: |
| Safety Procedures reviewed with Welder Y N |
| Safety Procedures reviewed with Fire Watch Y N |

Comments:

Supervisor Sign Off\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_

Work Completed Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time\_\_\_\_\_\_\_\_\_\_