

Wright State University

**HOT WORK  
PERMIT**

Date: \_\_\_\_\_

Building: \_\_\_\_\_ Floor: \_\_\_\_\_ Department: \_\_\_\_\_

Description of Work to be done: \_\_\_\_\_

Special Precautions: \_\_\_\_\_

**A Fire Watch is REQUIRED, including a dedicated person(s) with fire extinguisher and cell phone.**

**Fire Watch will be provided by:** \_\_\_\_\_

**\*PRECAUTIONS\***

Before approving any Hot Work Permit, the Fire Safety Supervisor or his appointee must inspect the work area(s) and confirm that precautions have been taken to prevent fire, in accordance with NFPA 51B.

**CHECK ALL ITEMS THAT APPLY TO THE OPERATION BEING PERFORMED SO THAT NECESSARY SAFETY AND FIRE PRECAUTIONS CAN AND WILL BE TAKEN.**

\_\_\_\_\_ Sprinklers in Service

\_\_\_\_\_ Cutting & welding equipment in good repair.

Any equipment which is in need of repair or service work should not be used until all necessary repairs or adjustments have been made.

**Within 35 Feet of Work**

\_\_\_\_\_ Floors have been swept, removing all combustibles.

\_\_\_\_\_ All combustible floor or wall surfaces have been wet down, covered with damp sand, metal or other fire safety shields.

\_\_\_\_\_ There are no combustible or flammable materials or liquids in the area.

\_\_\_\_\_ All wall and floor openings have been covered.

\_\_\_\_\_ Covers suspended beneath work to collect sparks.

**Work on Ceiling or Walls**

\_\_\_\_\_ The construction is non-combustible and does not have a combustible covering.

\_\_\_\_\_ ALL combustibles have been moved away from the opposite side of the wall.

**Fire Watch**

\_\_\_\_\_ A Fire Watch is to be provided during the operation and 30 minutes following completion of the operation.

\_\_\_\_\_ Supplied with extinguisher.

\_\_\_\_\_ Trained in proper use of equipment and how to sound the alarm.

\_\_\_\_\_ Supplied with cell phone. Provide cell phone number: ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

The above location where work is to be done has been examined and all necessary precautions checked above have been completed. Permission is granted for this work to be performed.

**Permit Effective Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Permit Expires Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(Individual Responsible for Fire Safety)*

**Final Check** – Work area and all adjacent areas to which sparks and heat might have spread (including floors above and below and on opposite sides of the walls) were inspected 30 minutes after the work was completed and were found fire safe.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_