**A picture containing knife

Description automatically generated **

HOT WORK PERMIT

Introduction

**HOT WORK PERMIT**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Before a Hot Work Permit may be issued, the ‘Hot Work Permit Checklist’ must be completed by the hot work operative ensuring all drop down and text boxes are completed. | | | | | | | |
| 1. | Before work is commenced - Complete sections A and B of the Hot Work Permit, ensuring all text boxes are utilised and print out or e-mail a copy for the hot work operative to retain for the duration of the works. | | | | | | |
| 2. | When the hot works have been completed and the area inspected, retrieve the operative’s printed copy and complete sections C and D. of the original electronic document, sign to confirm that the specified actions have been taken. | | | | | | |
| **Note: This Hot Work Permit may be printed out if a hard copy is required or e-mailed to the operator/Contracting Organisation.** | | | | | | | |
| **A copy of the completed permit should be retained for auditing purposes** | | | | | | |
|  | | | | | | |
| **ISSUING COMPANY**  Click here to enter text. | | | **PERMIT NO.**  **Click here to enter text.** | | | |
|  | | | | | | |
| Section A | | | | | | |
|  | | | | | | |
| PROPOSAL (to be completed by the person responsible for carrying out the work) | | | | | | |
|  | | | | | | |
| Building Click here to enter text. | | | | | | |
| Exact location of proposed work **Click here to enter text.** | | | | | | |
| Nature of work to be undertaken **Click here to enter text.** | | | | | | |
| I have completed and submitted the Checklist and understand the scope of work and precautions to be taken. | | | | | | **Select.** |
| Signed….. **Click here to enter text.** | | | Block Capitals **Click here to enter text.** | | | |
| Date.. **Click here to enter a date.** | | |  | | | |
| Contracting Organisation ( If Applicable ) **Click here to enter text.** | | | | | | |
| Section B | | | | | | |
| AGREEMENT (to be completed by Company Safety Officer or other nominated person – the 'Issuer of the Permit')  This Hot Work Permit is issued subject to the following conditions: | | | | | | |
| **Issue of Permit** | | Date **Click here to enter a date.** | | Time **Click here to enter text.** | | |
| **Expiry of Permit** | | Date **Click here to enter a date.** | | Time **Click here to enter text.** | | |
| **It is not desirable to issue permits for protracted periods. Fresh permits should be issued where, for example, work extends from morning to afternoon.** | | | | | | |
| A final inspection of the area of works shall be made not before (time): **Click here to enter text.** | | | | | | |
| Additional comments required:- Click here to enter text. | | | | | | |
| Signed: **Click here to enter text.** | | | Block Capitals: **Click here to enter text.** | | | |
| Date; **Click here to enter a date.** | | | Position: **Click here to enter text.** | | | |
| Section C | | | | | | |
| **FOLLOWING COMPLETION OF WORK**  (To be completed by member of staff or contractor responsible for the work. The permit should then be returned to the Issuer) | | | | | | |
| The work area and all adjacent areas to which sparks and heat might have spread (such as floors below and above and areas on other sides of walls) have been inspected and found to be free of smouldering materials and flames. | | | | | **Select.** | |
| Stub ends of welding rods and other hot waste materials have been removed and disposed of safely. | | | | | **Select.** | |
| Any isolated automatic fire detectors or detection zones have been reinstated. | | | | | **Select.** | |
| All equipment, including gas cylinders, has been removed to a safe area. | | | | | **Select.** | |
| TIME INSPECTION COMPLETED: **Click here to enter text.**  (this must be at least 60 minutes after work has been completed) | | | | | | |
| Signed: .. **Click here to enter text.** | | | Block Capitals: **Click here to enter text.** | | | |
| Date: **Click here to enter a date.** | | | Position: **Click here to enter text.** | | | |
|  | | | | | | |
| Section D | | | | | | |
| The hot work has been completed. Any detector(s) or zones of the fire alarm system that were isolated have been fully reinstated. | | | | | | |
| Signed: **Click here to enter text.** | | | Block Capitals **Click here to enter text.** | | | |
| Date.. **Click here to enter a date.** | | |  | | | |



British Frozen Food Federation

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