



# Hot Work Permit

0155

2023

BEFORE INITIATION HOT WORK, ENSURE ALL PRECAUTIONS ARE IN PLACE!  
MAKE SURE AN APPROPRIATE FIRE EXTINGUISHER IS READILY AVAILABLE!

| Instructions  |  | Required Precautions Checklist   |   |
|---|--|--|---|
| Supervisor:<br>1. Complete precaution checklist at right<br>2. Complete this form and retain Part 1<br>3. Issue Part 2 to competent person performing hot work  |  | <input type="checkbox"/> Sprinkler protection in service. If fire suppression is taken offline, UK Fire Marshal's Office AND UK Delta Room MUST BE NOTIFIED<br><input type="checkbox"/> Hot Work equipment is in good working order  |   |
| <b>Permit Information</b>   |  | <b>Requirements within 35 ft. of hot work</b>  |   |
| Hot work done by:<br><input type="checkbox"/> UK Employee <input checked="" type="checkbox"/> Contractor  |  | <input type="checkbox"/> Flammable liquid, dust, ink and oily deposits removed and floor swept clean<br><input type="checkbox"/> Explosive atmosphere in area eliminated (hot work is not to be conducted in a classified area unless made safe)   |   |
| Location/ building and floor:   | UK Hospital - Chandler Medical Center & Hospital (Pavilion H)<br>1 | <input type="checkbox"/> Nearby activities evaluated for conditions that could be affected by hot work<br><input type="checkbox"/> Path of likely sparks evaluated<br><input type="checkbox"/> Combustible floors wet down, covered with damp sand or fire-resistant sheets  |   |
| Reason for job:   | Welding  | <input type="checkbox"/> Remove other combustible material where possible. Otherwise, protect with approved welding pads, blankets and curtains or metal shields<br><input type="checkbox"/> All wall and floor openings covered<br><input type="checkbox"/> Fire resistive covers and metal shields provided as needed<br><input type="checkbox"/> Protect or shut down ducts and conveyors that might carry sparks to distant combustible material |   |
| <b>Personal Protective Equipment (if applicable)</b>  |  | <b>Hot work on walls, ceilings or roofs</b>  |   |
| <input type="checkbox"/> Welder's hood with appropriate lenses<br><input type="checkbox"/> Welder's gloves<br><input type="checkbox"/> Leather jacket/clothing<br><input type="checkbox"/> Head Protection<br><input type="checkbox"/> Hearing Protection<br><input type="checkbox"/> Respirator Type/cartridge: _____<br><input type="checkbox"/> Other: _____ |  | <input type="checkbox"/> Construction is noncombustible and without combustible covering or insulation<br><input type="checkbox"/> Combustible material on other side of walls, ceilings or roofs is moved away  |   |
| <b>Hot Work Performer</b>   |  | <b>Hot work on enclosed equipment (i.e., welding on tanks)</b>   |   |
| Name:   | Noah Patrick   | <input type="checkbox"/> Enclosed equipment cleaned of all combustible material<br><input type="checkbox"/> Containers purged of flammable liquid/vapor<br><input type="checkbox"/> Pressurized vessels, piping and equipment removed from service, isolated and vented  |   |
| Signature:  |  | <b>Hot work inside of enclosed spaces (i.e., inside of tanks)</b>  |   |
| <b>I verify the above information has been examined, the precautions checked on the Required Precautions Checklist have been taken to prevent fire, and permission is authorized for this work.</b>   |  | <input type="checkbox"/> Adequate ventilation provided<br><input type="checkbox"/> Atmosphere checked with gas detector per confined space permit<br><input type="checkbox"/> Area purged of any flammable or toxic vapors<br><input type="checkbox"/> Other permits completed as required: Lock-out/tag-out, working at heights, live electrical work   |   |
| <b>Hot Work Approval</b>  |  | <b>Hot work/Fire Safety Notifications</b>  |   |
| Name:   | James A Beazley  | <input type="checkbox"/> Location of nearest fire alarm known<br><input type="checkbox"/> If no alarm present, what method will be used to raise the alarm? (List in other precautions area below)   |   |
| Signature:  |  | <input type="checkbox"/> Escape routes maintained and known by personnel   |   |
| Date:   |  | <b>Fire Watch/Hot work area monitoring</b>   |   |
| Emergency Contact # : 859-396-5635  |  | <input type="checkbox"/> Fire watch will be provided for a minimum of 30 minutes after work has ceased<br><input type="checkbox"/> Fire watch is provided with suitable extinguishers<br><input type="checkbox"/> Fire watch trained in use of equipment and in sounding alarm.  |   |
| <b>Permit Dates</b>   |  | <b>Special Instructions</b>  |   |
| Permit Activated  | Date: 08/22/2023   | Time: 07:00  | When hot work is complete, submit completed permit to supervisor or project manager for UK EHS review |
| Permit Expires  | Date: 08/22/2023   | Time: 17:00  |   |
| Date and time work completed  | Date:  | Time:  |   |
| Final Fire Watch Check-up   | Date:  | Time:  |   |
| <b>Fire Watch Inspector Signature (below)</b>   |  |  |   |
| Signature:  |  |  |   |