



Possible Atmospheric Hazards in the Area to be Entered:	<u>Yes</u>	<u>No</u>	<u>N/A</u>
Lack of Oxygen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible Gases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible Vapors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Combustible Dusts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toxic Gases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Possible Hazards in the Area to be Entered:	<u>Yes</u>	<u>No</u>	<u>N/A</u>
Toxic Vapors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical Contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical Exposures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temperature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engulfment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entrapment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PRE-ENTRY CHECKLIST**

*If any of the following “Needs Action”, do not enter site until conditions are corrected.*

**OK    Needs Action**

- 1. Prior to initiating the project, the supervisor or designee shall notify the Durham Fire Department 862-1426.  
(Name of the person contacted \_\_\_\_\_)
- 2. A minimum of two employees shall be assigned to work involving confined space entry. One employee shall act as observer and remain outside the confined space at all times.
- 3. The surrounding area shall be surveyed to show it to be free of hazards such as drifting vapors from tanks, piping, sewers, or vehicle exhaust.
- 4. Those responsible for operation of the gas monitor to be used have been trained?
- 5. Has a gas monitor functional test (fresh air calibration) been performed this shift on the gas monitor to be used? If so, by whom?  
\_\_\_\_\_
- 6. Will the atmosphere be continuously monitored while the space is occupied, if required by entry procedure?

Entry Permit Supervisor \_\_\_\_\_ Time \_\_\_\_\_ Date \_\_\_\_\_

Completed       Canceled       Time \_\_\_\_\_ Reason \_\_\_\_\_

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**CALL 911 FOR ON or OFF CAMPUS EMERGENCIES.**