The removal of a lock and tag by someone other than the authorized employee who originally install it may be performed only after the completion of an Emergency Lock Removal Form

Completion of this form authorizes the following Authorized Employee ___________________________ to remove the lock(s) and tag(s) of another Authorized Employee. The lock(s)/tag(s) must be removed due to an emergency condition in the absence of the originating Authorized Employee. The Principal Authorized Employee has unsuccessfully attempted to contact the originating Authorized Employee, has assessed the equipment or machinery, reviewed the status of implemented servicing or maintenance activities with any and all necessary representatives, and has followed the Emergency Removal procedures as outlined in the UNH Control of Hazardous Energy (Lockout/Tagout) program.

Please list the name of the originating Authorized Employee:

________________________________________

Authorized Employee Name ___________________________ Signature ___________________________ Date

Principal Authorized Employee ___________________________ Signature ___________________________ Date

*This form will be maintained by the Principal Authorized Employees Department and a copy forwarded to OEHS.