

Check one:  NON-ENERGIZED ELECTRICAL WORK PERMIT\*  
 ENERGIZED ELECTRICAL WORK PERMIT

**PART I: TO BE COMPLETED BY THE REQUESTER**

Job/Work Order Number \_\_\_\_\_

- (1) Description of circuit/equipment/job location:  
\_\_\_\_\_
- (2) Description of work to be done:  
\_\_\_\_\_
- (3) Results of the Shock Hazard Analysis  
\_\_\_\_\_

Requester/Title \_\_\_\_\_ Date \_\_\_\_\_

**PART II: TO BE COMPLETED BY THE ELECTRICALLY QUALIFIED PERSONS *DOING* THE WORK:**

**Check when complete**

- (1) Detailed job description procedure to be used in performing the above detailed work: \_\_\_\_\_
- (2) Description of the Safe Work Practices to be employed: \_\_\_\_\_
- (3) Results of the Shock Hazard Analysis: \_\_\_\_\_
- (4) Determination of Shock Protection Boundaries: \_\_\_\_\_
- (5) Results of the Flash Hazard Analysis: \_\_\_\_\_
- (6) Determination of the Flash Protection Boundary: \_\_\_\_\_
- (7) Necessary personal protective equipment to safely perform the assigned task: \_\_\_\_\_
- (8) Means employed to restrict the access of unqualified persons from the work area: \_\_\_\_\_
- (9) Evidence of completion of a Job Briefing including discussion of any job-related hazards: \_\_\_\_\_
- (10) Do you agree the above described work can be done safely?  Yes  No (If *no*, return to requester)

Electrically Qualified Person(s) \_\_\_\_\_ Date \_\_\_\_\_

Electrically Qualified Person(s) \_\_\_\_\_ Date \_\_\_\_\_

**PART III: APPROVAL(S) TO PERFORM THE WORK WHILE ELECTRICALLY ENERGIZED:**

Subcontractor Supervisor \_\_\_\_\_ Electrical Safety Officer \_\_\_\_\_

Project Manager \_\_\_\_\_ UT-B Level II Manager \_\_\_\_\_

\*For verification of de-energized circuits, physical isolation of de-energized (but potentially shared) neutrals, etc.