

ALTERNATIVE PROCEDURE WORK SHEET

This worksheet is intended to provide written certification that the permit space qualifies for alternative procedures and verifies that the space is safe for entry. This checklist should be augmented with any relevant information for this certification process.

Permit Space Location			
What is the size (volume) and configuration of the space?			
What tasks are to be performed during the entry operation?			
Questions	Yes	No	
Have employees received permit space training?	<input type="checkbox"/>	<input type="checkbox"/>	
Has the certifier received permit space training?	<input type="checkbox"/>	<input type="checkbox"/>	
Is a hazardous atmosphere the only hazard of concern?	<input type="checkbox"/>	<input type="checkbox"/>	
If no, alternative procedures cannot be used.			
Does the atmospheric hazard in the space have the potential to create high temperatures or high pressures?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes, take appropriate action before removing cover			
Are conditions safe to remove cover?	<input type="checkbox"/>	<input type="checkbox"/>	
If no, cover removal is prohibited			
After cover removal, is opening properly guarded?	<input type="checkbox"/>	<input type="checkbox"/>	
List guarding methods:			
Continuous forced air ventilation provided?	<input type="checkbox"/>	<input type="checkbox"/>	
If no, explain why. If yes, explain capacity (CFM) air exchange rate.			
Minimum ventilation duration prior to allowing entry			
Is atmospheric testing equipment calibrated?	<input type="checkbox"/>	<input type="checkbox"/>	
Date of calibration			

Atmospheric Testing Record		
Substance	Acceptable Level	Readings
Oxygen	19.5% - 23.5%	
Explosive (Gas/Vapor)	<10% LFL	
Explosive Dust	<LFL (5 ft. Visibility)	
Carbon Monoxide	50 PPM	
Hydrogen Sulfide	10 PPM	
Does inspection of interior have to be conducted to see if other hazards exist		
If yes, full entry program is required.		
Is frequent or periodic testing performed?		
If no, explain why		
Who is to perform frequent or periodic monitoring?		
If a hazardous atmosphere is detected during entry, have employees been instructed to evacuate immediately?		
Is there a procedure to reevaluate the space if a hazardous atmosphere does develop?		
Describe Procedure:		
Have steps been taken to prevent employees from re-entering the space until it is proven to be safe?		
List steps		
Have employees had the opportunity to review the data to support use of alternative procedures?		

Signature of Certifying Head

Date