

Appendix F

CONTRACTOR'S PERMIT REQUIRED CONFINED SPACE PROGRAM AFFIRMATION

To be completed by the contractor and returned to the University's Project Manager.

_____ hereby affirms the following in regard to the
(Name of company / contractor)

_____ project scheduled to start on _____
(project name or number)

Date

Yes No
" "

1. The contractor has a written **Permit Required Confined Space (PRCS)** program that includes the following:

- Procedures for safe PRCS entry operations.
- Means of specifying acceptable entry conditions.
- Procedures for isolating the PRCS.
- Procedures for eliminating or controlling atmospheric hazards. (blower and duct)
- Means of providing barriers as necessary to protect from external hazards.
- Means of verifying acceptable conditions throughout entry operations.

Yes No
" "

2. The contractor will use an **Entry Permit** that documents compliance with OSHA regulations and identifies the following:

- The permit space to be entered.
- The purpose of the entry.
- The date and duration of the entry permit.
- The names of entrants, attendants, and entry supervisor.
- The hazards of the PRCS to be entered.
- The means of isolating the PRCS and controlling the hazards.
- The acceptable entry conditions.
- The results of initial and periodic atmospheric test.
- The means of summoning NCSU Public Safety in an emergency. (515 - 3333)
- The communication procedures used between entrants and attendants. (radio, cell phone)
- Equipment needed such as PPE, atmospheric testing, rescue devices, tools.
- Any other information needed to ensure employee safety.
- Any additional permits needed, such as hot work permits.

Yes No
" "

3. The contractor will use only employees or subcontractors that have current **training** in PRCS entry operations, rescue procedures, and use of monitoring equipment.

Yes No
" "

4. The contractor will provide a copy of the Entry Permit to the University's Project Manager upon request.

Yes No
" "

5. The contractor will provide information to the University's Project Manager regarding hazards that were encountered or created during entry.

Comments: _____

Contractor's Signature _____ Date _____	Reviewed by: (Project Manager) _____ Date _____
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