Confined Space/Permit Space Identification Survey

Name/description of this space
____________________________________

Location of this space
____________________________________

Person performing this survey
____________________________________

Date of this survey
____________________________________

Section 1 — Use this section to determine if the space is a confined space

Is the space large enough and so configured that an employee can enter and perform assigned work?

Yes ☐  No ☐

Does the space have restricted means for entry or exit? Doorways and other portals through which a person can walk are normally not considered restricted means for entry or exit.

Yes ☐  No ☐

Is the space not designed for continuous employee occupancy?

If all three answers are Yes, this is a confined space. Proceed to Section 2.

Section 2 — Use this section to determine if the space is a permit space

Does the space contain or have a potential to contain a hazardous atmosphere? Examples: combustible dusts, flammable mixtures, or oxygen deficiency that may expose employees to the risk of death, incapacitation, or acute illness.

Yes ☐  No ☐

Does the space contain a material that has the potential for engulfing an entrant? Examples: liquids or granular solids.

Yes ☐  No ☐

Does the space have an internal configuration such as inwardly converging walls or a sloping floor that could trap or asphyxiate an entrant?

Yes ☐  No ☐

Does the space contain another serious safety or health hazard? Examples: radiation, noise, electricity, and moving parts of machinery.

Yes ☐  No ☐

If any answer is Yes, this is permit space. An entry permit is required for entry.

Air Monitoring Results: Acceptable levels: H2S = 0    CO = 0    O2 = 19.5 %    LEL = 0%

H2S ppm ________    CO ppm ________    O2 % ________    LEL% ________

If results are not acceptable, contact EHS.