

Confined Space Entry Checklist

 Show only Checklist

Display Style
Default 

Pre-Entry Planning & Authorization

Verifies necessary permits, hazard assessments, and team qualifications are in place before entry.

Permit Issue Date

Permit Issue Time



Permit Validated By (Supervisor)

- Supervisor A
- Supervisor B
- Supervisor C

Confined Space Designation

- Non-Permit Confined Space
- Permit-Required Confined Space

Brief Description of Entry Task

Write something...

Maximum Authorized Entrants

Enter a number...

Entry Team Roles Assigned

- Attendant
- Entrant
- Supervisor
- Safety Observer

Hazard Assessment Document

 Upload File

Permit Number

Write something...

Confined Space Identification & Evaluation

Details the specific confined space being entered and initial hazard assessment findings.

Confined Space Name/Location

Write something...

Brief Description of Confined Space

Write something...

Dimensions (Length x Width x Height)

Enter a number...

Purpose of the Confined Space (e.g., Tank Cleaning, Maintenance)

Write something...

Potential Hazards Identified (Check all that apply)

- Oxygen Deficiency
- Toxic Gases
- Flammable Atmospheres
- Engulfment Hazard
- Physical Hazards (e.g., Noise, Heat)
- Other (Specify in Long Text)

Specific Hazards and their Potential Severity

Write something...

Confined Space Classification (Based on initial assessment)

- Non-Permit Space
- Permit-Required Space

Date of Assessment

Enter date...

Hazard Identification & Control

Lists identified hazards and the controls implemented to mitigate them (e.g., ventilation, lockout/tagout).

Describe Potential Hazards Identified (e.g., Oxygen Deficiency, Toxic Gases, Engulfment)

Write something...

Potential Hazards Present (Select all that apply)

- Oxygen Deficiency
- Toxic Gases (Specify: _____)
- Flammable/Explosive Atmospheres
- Engulfment Hazard
- Physical Hazards (e.g., Noise, Heat, Cold)
- Other (Specify: _____)

Describe Control Measures Implemented for Each Hazard (e.g., Ventilation, Lockout/Tagout, Isolation)

Write something...

Ventilation Rate (CFM)

Enter a number...

Lockout/Tagout Procedures Verified?

- Energy Source Identified
- Isolation Devices Verified
- Lock/Tag Applied
- Equipment De-energized

Specific Procedures for Hazard Mitigation (e.g., gas blanketing)

Write something...

Residual Risk Level (After Controls)

- Low
- Moderate
- High
- Unacceptable - Entry Prohibited

Date of Hazard Control Verification

Enter date...

Time of Hazard Control Verification

Enter time...

Atmospheric Monitoring & Ventilation

Documents atmospheric testing results and ongoing ventilation procedures.

Atmospheric Monitoring Start Time

Oxygen (O₂) Reading (ppm/%)

Flammable Gas/Vapor Reading (LEL%)

Hydrogen Sulfide (H₂S) Reading (ppm)

Ventilation Status

- Mechanical Ventilation
- Forced Air Ventilation
- Natural Ventilation
- No Ventilation Required

Ventilation System Description (Fan type, CFM, etc.)

Write something...

Last Atmospheric Monitoring Time

Enter time...

Monitoring Equipment Calibration Status

- Calibrated and Within Date
- Calibration Due
- Out of Calibration

Entry Permit & Team Briefing

Confirms the permit is valid, and the entry team has been briefed on roles, responsibilities, and procedures.

Permit Issue Date

Enter date...

Permit Issue Time

Enter time...

Permit Expiration Date

Enter date...

Permit Expiration Time

Enter time...

Permit Authorizing Supervisor

- Supervisor A
- Supervisor B
- Supervisor C

Permit Number

Write something...

Briefing Summary (Team Discussion Points)

Write something...

Team Roles Confirmed?

- Attendant
- Entrant
- Supervisor
- Alternate Entrant

Communication Method Confirmed?

- Verbal
- Radio
- Hand Signals

Entrant Acknowledgement

Equipment & Safety Gear

Verifies proper safety equipment is available and in good working order (e.g., harnesses, lifelines, respirators).

Harness Inspection Status

- Pass
- Fail - Repair Needed
- N/A - Not Required

Lifeline Inspection Status

- Pass
- Fail - Repair Needed
- N/A - Not Required

Respirator Fit Test Expiration Date (MM/DD/YYYY)

Enter a number...

Respirator Type

- SCBA
- APR
- None Required

Lighting Equipment

- Present & Functioning
- Missing/Defective

PPE Check

- Hard Hat
- Safety Glasses
- Gloves
- Steel-toed boots
- Hearing Protection

Communication Device

- Functional Radio
- Functional Alternate Communication
- Not Required

Entry & Ongoing Monitoring

Records observations during entry, including continuous atmospheric monitoring results and team communication.

Entry Start Time

Oxygen Level (%)

Flammable Gas/Vapor Level (%)

Enter a number...

Lower Explosive Limit (LEL) (%)

Enter a number...

Atmospheric Monitoring Status

Continuous

Intermittent

Observer Notes/Communication Log (Record all communications and significant observations)

Write something...

Last Atmospheric Monitoring Time

Enter time...

Unusual Occurrence?

No

Yes

Description of Unusual Occurrence (if Yes)

Write something...

Exit & Post-Entry Procedures

Details the steps taken during exit and any post-entry tasks required (e.g., equipment inspection, permit closure).

Exit Time

Enter time...

Post-Entry Observations (Unusual Events, Issues)

Write something...

Atmospheric Readings Upon Exit (O2, LEL, H2S, etc.)

Enter a number...

Equipment Condition After Use (Satisfactory/Needs Repair)

- Satisfactory
- Needs Repair

Equipment Requiring Repair (Check all that apply)

- Harness
- Lifeline
- Respirator
- Ventilation Fan
- Lighting
- Communication System
- None

Permit Expiration Date (Confirmation)

Enter date...

Permit Issuer Signature (Confirmation)

Corrective Actions Required (if applicable)

Write something...

