

Sanitary and Stormwater Pump Lift Station -- Permit Required Confined Space Entry Permit

1. Sanitary and Stormwater Pump Lift Station Entry Procedure and Permit

****All shaded areas must be completed by the Entry Supervisor or Entrant****

2. Work to be Performed and Location:	3. Date Issued: / / Time Issued: : <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
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4. Permit Space Hazards (X = Potential Hazard or Testing Requirement)

X	Oxygen - hazardous when less than or equal to 19.5% OR greater than or equal to 23.5 %.		Mechanical Hazards (Pneumatic, Hydraulic, Electrical, Chemical, Steam, Falling Objects, Etc.)
X	Flammable Gases or Vapors - hazardous when greater than 10% of LFL / LEL.	X	Engulfment Potential
X	Hydrogen Sulfide - hazardous when greater than 10 PPM		Physical Hazards - (bees, insects, spiders, heat during the summer)
X	Carbon Monoxide - hazardous when greater than 50 PPM (always look for when welding or near a fuel combustion source (cars, utility carts, etc.)	X	Confined Space Configuration, Layout or Arrangement
	Other Toxics:		

5. Additional Permits or Forms (Please attach if required)

Hot Work Permit: ☐YES ☐NO ☐N/A LOTO / Hazardous Energy Control Procedure: ☐YES ☐NO ☐N/A Other:

6. Equipment Required for Entry & Work (Check box when complete)

<input type="checkbox"/> PPE	Eye protection, Tyvek suit, rubber gloves, rubber boots, and body harness.
<input type="checkbox"/> Atmospheric Testing	4-Gas Meter required for testing. Test atmosphere in sanitary sewer lift station by using stratified method of checking atmosphere at different levels within the space. Continuous monitoring is required throughout the duration of the entry.
<input type="checkbox"/> Respiratory Protection	Not required for this space under normal atmospheric conditions. If contaminant levels are outside limits, ventilate space before entry.
<input type="checkbox"/> Ventilation Equipment	Check atmosphere by 4-gas meter prior to and during entry. Ventilation must be used on sanitary sewer lift station due to sewage gas. Fully open all access covers, if possible, to help improve the fresh air ventilation of the system.
<input type="checkbox"/> Rescue Equipment	Set up rescue tripod with 4-way hauling system to pull out entrant in the event of an emergency. Entrant must wear harness and be connected to the 4-way hauling system.

7. Communication method used by attendants and entrants (Check all that apply)	8. Confined Space Rescue
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<input type="checkbox"/>	Radio	<input type="checkbox"/>	The assigned confined space attendant is responsible for evacuating entrants in the event of an emergency by means of vocal communication or retrieval equipment used for the entry. At no time will the attendant enter the confined space. In the event the attendant is unable to evacuate the entrant(s), the Charlotte Fire Department will be notified by UNC Charlotte Police Dispatch at 704-687-2200 to provide rescue assistance. Upon the arrival of rescue personnel, the attendant should brief the rescuers of any notable information.
<input type="checkbox"/>	Voice		
<input type="checkbox"/>	Other		

8. Confined Space Rescue

<input type="checkbox"/>	<p>The assigned confined space attendant is responsible for evacuating entrants in the event of an emergency by means of vocal communication or retrieval equipment used for the entry. At no time will the attendant enter the confined space. In the event the attendant is unable to evacuate the entrant(s), the Charlotte Fire Department will be notified by UNC Charlotte Police Dispatch at 704-687-2200 to provide rescue assistance. Upon the arrival of rescue personnel, the attendant should brief the rescuers of any notable information.</p>
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9. Authorized Entrants (List by name)	10. Authorized Attendants (List by name)
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10. Authorized Attendants (List by name)

11. Preparation for Entry (Check boxes when complete)

<input type="checkbox"/>	Notify affected departments of service interruption and complete the Confined Space Entry Permit and other related permits or forms. Sewage/Storm flow to the lift station needs to be limited as much as possible through departmental notification. Service on an outdoor lift station should be completed on a day with no precipitation or chance of precipitation that may enter the sump. If necessary, use a pump within the lift station well to remove excess water.
<input type="checkbox"/>	Inspect all required equipment, tools and PPE prior to entry. Barricade the area to prevent unauthorized entry or access. Setup necessary equipment for entry operations.
<input type="checkbox"/>	Ensure that all hazardous energy to the lift station pump system is isolated per the specific Hazardous Energy Control Procedure.
<input type="checkbox"/>	Sign in Authorized Entrants in Step 9 and Sign in Attendants in Step 10.
<input type="checkbox"/>	Open all access covers, if possible, to help improve the fresh air ventilation of the system. Take a preliminary atmospheric reading with approved 4-gas meter and record reading on Step 12. Atmosphere should be continuously tested during entry. Periodically record sample readings in Step 12. Ventilate as necessary. Test atmosphere from the bottom to the top of the lift station well so that all levels are checked.
<input type="checkbox"/>	Upon eliminating or controlling all hazards and the Entry Supervisor signing Step 13, proceed to make entry.

12. Atmosphere Testing Record Acceptable Conditions	Pre-Entry Results	Entry #1 Results	Entry #2 Results	Entry #3 Results	Entry #4 Results	Entry #5 Results
Time of Sampling						
CH ₄ – Methane - Less than 10% of LEL / LFL						
O ₂ - Oxygen Range - Minimum allowable = 19.6% to Maximum allowable = 23.4%						
H ₂ S - Hydrogen Sulfide - < than 10 PPM						
CO - Carbon Monoxide - < than 35 PPM						
Other Toxic:						
Tester Initials						

13. Authorization by Entry Supervisors									
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I certify that all required precautions have been taken and necessary equipment is provided for safe entry and work in this sanitary sewer lift station confined space.

Printed Name _____ Signature _____ Date _____ Time _____ ☐ a.m. ☐ p.m.

14. Permit Cancellation (Complete at the end of job not to exceed 24 hours)	Date	Time	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
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This permit must be posted at the job site -- One Copy to Department's File and One Copy to EHS Office (Fax 7-5302 or EHS Building)