Confined Space Safety Assessment



SECTION 1: Information						
Confined Space ID:	Vertical Pipe Chase	Developed By:	Tighe & Bond			
Asset ID:	CSSA-41	Origin Date:	July 2019			
Building:	Healey Library	Revision #	0			
Entry Location:	Door	Revision Date:	-			
Entry Purpose:	Repair and Maintenance					

SECTION 2: Confined Space Determination

If needing to enter an enclosed space, indicate which of the following apply:				
1. Is the space large enough and so configured that you can bodily enter and perform work?	Х			
2. Does the space have limited or restricted means for entry or exit? (Would it be difficult to exit the space through a standard door, ramp, or OSHA-compliant stairs?)		X		
3. Is the space intended for continuous employee occupancy? (Is the space equipped with HVAC, desk, phone, lighting, or other typical comforts of continuous occupancy)		X		

If you have checked <u>ANY</u> of the highlighted boxes, you <u>DO NOT</u> have a confined space.

Otherwise, you have a Confined Space.

Does this space meet the definition of a Confined Space?

No

SECTION 3: Assessment of Atmospheric Hazards

Atmospheric Hazard	Actual or Potential Hazard?		Can it be Eliminated?		Means to Eliminate Atmospheric Hazard
	Y	N	Y	N	
Oxygen Deficiency		Х			
Flammable Gas or Vapor		X			
H₂S (Hydrogen sulfide)		X			
CO (Carbon Monoxide)		X			
Other Toxic Gas (Specify below):			•	•	
			•		

SECTION 4: Assessment of Serious Safety Hazards

Hazards which are immediately dangerous to life or health or would impair your ability to perform a self-rescue

Serious Safety Hazards	Actual or Potential Hazard?		Serious Safety Hazards	Actual or Potential Hazard?	
	Υ	N		Y	N
Engulfment Hazard		Х	Other Serious Safety Hazard		X
Trapping Hazard	Х		Moving Parts or Agitator		X
Converging walls		X	Steam or Extreme heat/cold		X
Tapered floor		Х	Shock or Electrocution	X	
Sloping floor		Х	Other (Specify):		

Means to Eliminate Engulfment and Other Serious Safety Hazards

Means to Eliminate Trapping Hazards

If you have <u>ONLY</u> checked shaded boxes in Section 3 and Section 4, you do not have a permit required confined space. Stop completing this form, and you may enter without a permit.

Otherwise, continue completing this form.

Does this space meet the criteria for a non-Permit Confined Space?

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SECTION 5: Assessment of Other Safety Hazards

Other Safety Hazards	Other Safety Hazards		Means to Eliminate Safety Hazard		
	Y	N	Y	N	
Eye / Skin Hazard		Х			
Mechanical Hazard		X			
Cold/Heat Stress		Х			
Cold/Hot Surfaces		Х			
Space Configuration		X			
Egress / Access		х			
Slippery Surfaces		X			
Elevated Work (Falls)	X				Fall protection equipment.
Other (Specify below):		Х			

SECTION 6: Entry Classification

Reclassification Assessment				
1. Is there an actual or potential atmospheric hazard (Section 3) – Even if controlled?		X		
2. Can all Serious Safety Hazards (Section 4) be eliminated without entry?	X			
3. Can all Other Safety Hazards (Section 5) be eliminated without entry?	X			

If you have checked <u>ONLY</u> shaded boxes, you can reclassify the space as a non-permit required confined space. Stop completing this form, and you may enter without a permit.

Can this space be reclassified to a non-Permit Confined Space?	NA
Permit Required Confined Space?	NA

Should any planned or unplanned activities or hazards occur which are not listed above, such as welding, cutting, chemical usage, etc. would require a reassessment of the of the space prior to entry.

SECTION 7: Photo(s)