

CONFINED SPACE PRE-ENTRY LOG

Date: _____ Location: _____ Type of Space _____

Reason for Entry: _____

- | | Supervisor
Initials if
Completed |
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| 1. Are all pumps and lines which may reasonably cause contaminants to flow into the space have been disconnected, blinded and locked out, or effectively isolated? | _____ |
| 2. Are all affected laterals blocked if there is a reasonable potential for contamination of air or engulfment into an occupied sewer? | _____ |
| 3. Has the area surrounding the confined space been surveyed for hazards such as drifting vapors from tanks, piping or sewers? | _____ |
| 4. Has air been blown into the confined space to remove potential harmful vapors, gases, or fumes? | _____ |
| 5. Does monitoring and inspection data supports that the only hazard posed | |
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