

## **Brooks Construction Co., Inc.**

## TANK CONFINED SPACE PROCEDURE

| 1. The type of work to be performed is routine maintenance?   |  |                     |  |               |       |    |
|---|--|---------------------|--|---------------|-------|----|
| 2. The employee(s) entering the confined space have received the annual training?   |  |                     |  |               |       | ΓN |
| 3. All necessary personal protective equipment will be used? (Including but not limited to: hardhat, safety glasses, etc.)          |  |                     |  |               |       | ΓN |
| 4. An attendant (hole watcher) will be stationed outside the space entrance and has secured proper communications with the entrant? |  |                     |  |               |       | ΓN |
| 5. Is all work going to be perf   | □ YES  | ΓN                  |  |               |       |    |
| 6. Has the heating system for   | □ YES  | ΓN                  |  |               |       |    |
| 7. The asphalt tank has been of hot oil valves, supply lines, et  | □ YES  | ΓN                  |  |               |       |    |
| 8. Doors and panels that need removed. Will be removed for ventilation?   |  |                     |  |               |       | ΓN |
| 9. Ventilation may be used before and during confined space work to cause air flow?   |  |                     |  |               |       | ΓN |
| 10. Work safely and cautiously to prevent accidents?  |  |                     |  |               | T YES | ΓN |
| If any of the above points  | e: a lifeline will not be required do<br>are marked no, the space will be<br>notified. If the above points are<br>permit required space and wo | regarde<br>all marl | ed as a pe                             | rmit required |       |    |
| Plant Site  | Lead operator's signature  |                     | Date                                   | Time          | _     |    |
| Entrant's signature   |  | 9                   | —————————————————————————————————————— | Time          |       |    |

Fax completed form to Fort Wayne Office, Attn: Safety Director (260-469-6109) and retain this copy for your records



## **Brooks Construction Co., Inc.**

## SILO CONFINED SPACE PROCEDURE

| 1. The type of work to be perf  | ┌ YES   | Γ NC             |        |   |      |
|---|---|------------------|--------|---|------|
| 2. The employee(s) entering the confined space have received the annual training?   |   |                  |        |   | □ NC |
| 3. All necessary personal protective equipment will be used? (Including but not limited to: hardhat, safety glasses, etc.)          |   |                  |        |   | Γ NC |
| 4. An attendant (hole watcher) will be stationed outside the space entrance and has secured proper communications with the entrant? |   |                  |        |   | □NC  |
| 5. Is all work going to be performed by Brooks Construction Co., Inc. employees?  |   |                  |        |   | T NC |
| 6. Has the heating system for the tank been turned off and allowed to cool? (if applicable)   |   |                  |        |   | □ NC |
| 7. The asphalt silo has been completely locked out? (Including but not limited to: electricity, hot oil valves, supply lines, etc.) |   |                  |        |   | 厂 NC |
| 8. Doors and panels that need   | T YES   | <b>□</b> NC      |        |   |      |
| 9. Ventilation may be used before and during confined space work to cause air flow?   |   |                  |        |   | ΓNC  |
| 10. Work safely and cautiously to prevent accidents?  |   |                  |        |   | T NC |
| Note  | : a lifeline will not be required due   | to additional h  | azards |   |      |
|   | are marked no, the space will be re<br>notified. If the above points are al<br>permit required space and work | ll marked yes, t |        |   |      |
| Plant Site  | Lead operator's signature   | Date             | Time   | _ |      |
| Entrant's signature   | 2   | Date             | Time   | _ |      |