

HOT WORK PERMIT

STOP!

Avoid hot work when possible! Consider using an alternative cold work method.

This Hot Work Permit is required for any temporary operation involving open flames or producing heat and/or sparks conducted outside a Hot Work Designated Area. This includes, but is not limited to: brazing, cutting, grinding, soldering, torch-applied roofing and welding.

Instructions for Permit Authorizer

1. Specify the precautions to take.
2. Fill out and keep **Part 1** during the hot work process.
3. Issue **Part 2** to the person doing the job.
4. Keep **Part 2** on file for future reference, including signed confirmation that the post-work fire watch and monitoring have been completed.
5. Sign off the final check on **Part 2**.

HOT WORK BY

- Employee
 Contractor _____

DATE

JOB NUMBER

LOCATION OF WORK (BUILDING/FLOOR/OBJECT)

WORK TO BE PERFORMED

NAME OF PERSON PERFORMING HOT WORK

NAME OF PERSON PERFORMING FIRE WATCH

I verify the above location has been examined, the Required Precautions have been taken, and permission is authorized for this work.

PERMIT AUTHORIZER (PRINT AND SIGN)

THIS PERMIT EXPIRES ON (LIMIT AUTHORIZATION TO ONE SHIFT):

DATE: _____ TIME: _____ AM/PM

Note: Emergency notification on back of form.

Additional FM Global Resources:

Property Loss Prevention Data Sheet 10-3, *Hot Work Management*
 Hot Work Permit App via fmglobal.com/apps
 Hot Work Permit form (F2630) via fmglobalcatalog.com
 Online training at training.fmglobal.com
 FM Approved equipment via fmapprovals.com



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Part 1

Y NA

- The fire pump is in operation and switched to automatic.
 Control valves to water supply for sprinkler system are open.
 Extinguishers are in service/operable.
 Hot work equipment is in good working condition.

Requirements within 35 ft. (10 m) of hot work

- Shield combustible construction using listed (e.g., FM Approved) welding pads, blankets and curtains.
 Remove or shield nonremovable combustibles using listed (e.g., FM Approved) welding pads, blankets and curtains.
 Isolate potential sources of flammable gas, ignitable liquid or combustible dust/lint (e.g., shut down equipment).
 Remove ignitable liquid, combustible dust/lint and combustible residues.
 Shut down ventilation and conveying systems.
 Remove combustibles and consider a second fire watch on opposite side of floor, wall, ceiling or roof when openings exist or thermally conductive materials pass through.
 Is work on a combustible building assembly (e.g., Torch-Applied Roofing)? If yes, provide **ADDITIONAL REQUIRED PRECAUTIONS** below.

Hot work on/in closed equipment, ductwork or piping

- Isolate equipment from service.
 Remove ignitable liquid and purge flammable gas/vapor.
 Prior to work, and/or during work, monitor for flammable gas/vapor. LEL reading(s): _____
 Remove combustible dust/lint or other combustible materials.
 Is work on/in equipment with nonremovable combustible linings or parts? If yes, provide **ADDITIONAL REQUIRED PRECAUTIONS** below.

Fire watch/fire monitoring the hot work area

Times listed are sufficient for majority. Use Table at back of permit for guidance for combustible concealed cavities, roof work or favorable factors.

- Perform a continuous fire watch during hot work.
 Perform a continuous fire watch post-work for
 1 hour or Other ___ hours.
 Perform fire monitoring for
 3 hours or Other ___ hours.

ADDITIONAL REQUIRED PRECAUTIONS:

WARNING

HOT WORK IN PROGRESS! Watch for fire!

Instructions

Person performing hot work: Record time started and display permit at hot work area. After hot work is completed, record time and leave permit displayed for fire watch.

Fire watch: Watch area during hot work and after work completion. Prior to leaving area, perform final inspection, sign, leave permit displayed and notify Fire Monitor or Permit Authorizer.

Fire Monitor: Monitor area after post-work fire watch completion. Perform final inspection, sign and return to Permit Authorizer.

HOT WORK BY

- Employee
 Contractor _____

DATE

JOB NUMBER

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WORK TO BE PERFORMED

NAME OF PERSON PERFORMING HOT WORK

NAME OF PERSON PERFORMING FIRE WATCH

I verify the above location has been examined, the Required Precautions have been taken, and permission is authorized for this work.

PERMIT AUTHORIZER (PRINT AND SIGN)

THIS PERMIT EXPIRES ON (LIMIT AUTHORIZATION TO ONE SHIFT):

DATE:	TIME:	AM/PM
Hot Work Date:	Start Time: Finish Time:	am/pm am/pm
Post-Work Fire Watch Name	Finish Time:	am/pm
Fire Monitor <input type="checkbox"/> Person <input type="checkbox"/> Other	Finish Time:	am/pm
Name/Other		
Final Check	Time:	am/pm
Name		

Part 2

Y NA

- The fire pump is in operation and switched to automatic.
 Control valves to water supply for sprinkler system are open.
 Extinguishers are in service/operable.
 Hot work equipment is in good working condition.

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