STRIKE	CONFINED SPACE RESCUE PLAN	CF-S-44

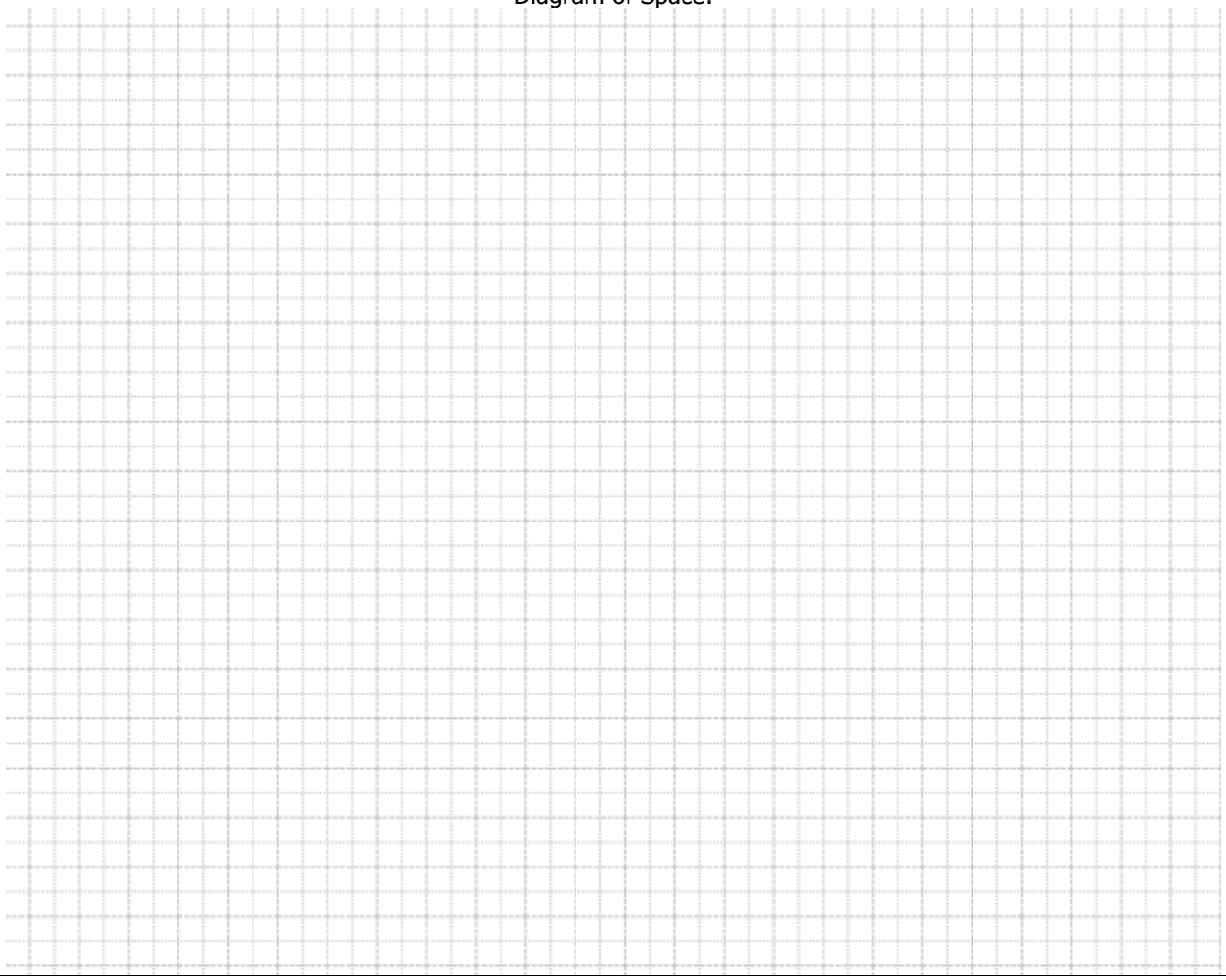
Instructions:

- Workers required to enter a confined space must complete and sign this form and a supervisor must review and approve the plan.
- The form should be attached to the HIAC/THA form completed for the task
- Safety watch can never be part of the recue team or enter the confined space, they must only monitor and report

General Information			
Business Unit:	Project #:	Date:	
Client:	Supervisor:	Permit #:	
Scope of Work: _____			
Work Location: _____			
Confined Space Class?	☐Class1	☐Class 2	☐Class 3
Potential for:	☐Explosive Atmosphere	☐Toxic Atmosphere	☐Oxygen deficiency
Contents last contained have been identified:		☐Yes	☐No
Confined Space Personnel Assigned:			
☐ Safety watch	☐ Entrants	☐ Rescuers	
All workers are trained in confined space and were involved in the rescue plan?		☐Yes	☐No
If no, explain:			
Confined Space Hazard Controls			
☐ Lock out tag out	☐ Blinding/Blanking	☐ Bump/zero energy check	Verified by: _____
☐ Ventilation	☐ Purging	☐ Washed/Steamed	☐ Confined space sign
☐ COP-03 CSE reviewed	☐ GFCI protection	☐ HIAC complete	☐ Other:
Comments:			
Rescue Equipment:			
☐ Harness	☐ Rope	☐ Manual winch	☐ Hauling System ☐ Spreader bar
☐ SCBA/SABA	☐ Light	☐ Ascenders	☐ Pulley/Carabiner ☐ Other:_____
Pre-use inspections complete?	☐Yes	☐No	Comments:
Methods of Rescue:			
☐External (Retrieval): Winch, rope, etc.		☐Internal (Entry): Rescue team enters	
Methods of Communication:			
Attendant communication method to Rescue team:			
☐ Phone	☐ Radio	☐ Audible Signal	
Attendant communication method to Entrants:			
☐ Phone	☐ Radio	☐ Audible Signal	☐ Visual Hand Signal ☐ Rope Signal
Pre-use test completed?	☐Yes	☐No	Comments:
Additional PPE:			
☐ Tyvek Suit	☐ Specialized Gloves	☐ RPE/SCBA/SABA	☐ Hearing Protection
☐ Goggles	☐ Personal Monitor	☐ Rescue Harness	☐ Other:
Monitoring of Atmosphere and hazards			
Continuous monitoring required (if atmosphere has potential to become hazardous)		☐Yes	☐No
Monitor bump test completed?		☐Yes	☐No
Entry Log and Test Log in place?		☐Yes	☐No

STRIKE	CONFINED SPACE RESCUE PLAN	CF-S-44

Diagram of Space:



General Notes:

Role	Print Name	Signature	CSE Ticket
Safety Watch			☐
Entrant			☐
Entrant			☐
Entrant			☐
Entrant			☐
Rescuer Lead			☐
Rescuer			☐
Rescuer			☐
Rescuer			☐
Approved By:			

STRIKE	CONFINED SPACE TEST LOG	CF-S-44

Confined Space Location/Name:					
Test Time	**Tested by**	**O2**	**LEL**	**H2S**	**Other:**
Safety Watch Signature:	Print Name:	Date:			
Supervisor Signature:	Print Name:	Date:			

STRIKE	CONFINED SPACE ENTRY LOG	CF-S-44

Business Unit:	Project #:	Date:
Client:	Supervisor:	Permit #:
Safety Watch:	Rescuer Lead:	

Entrant's Name	Time In	Time Out	Running Time
Reason for entry:			
Reason for entry:			
Reason for entry:			
Reason for entry:			
Reason for entry:			
Reason for entry:			
Reason for entry:			
Reason for entry:			
Reason for entry:			
Reason for entry:			