STRIKE	Lock Out Log	CF-S-63

Job Location:		Permit No:	
Work Description:		Date:	Time:
Person Responsible:		Estimated Time to Complete Job:	
Purpose:		Type: ☐Individual ☐Multiple Person ☐Group	

Isolation Point (e.g., breaker, switch, valve)	Lock/ Tag #	Locked Position Open/ Closed	Lock/Tag Installed By:	Zero Energy Verified By:	Date/ Time:	Lock/Tag Removed By:	Unlocked Position Open/ Closed	Date/ Time:

Lock boxes: All workers involved must have a lock on the group lock box.

Worker's Name:	Company:	Lock/Tag Installed Date/Time:	Lock/Tag Removed Date/Time

Operating Authority (Owner/Prime/Client) (if applicable): Print: Sign:	Date/Time /
Performing Authority (Contractor or group doing the work) : Print: Sign:	Date/ Time /
Hand Back: Job Completed: ☐ Yes ☐ No	

Operating Authority (if applicable) Sign:	Performing Authority Sign:	Date/Time /

Refer to Strike's COP-05 for LOTO Details