



ENDURANCE TECHNOLOGIES LTD.

HEIGHT and ROOF ACTIVITY WORK PERMIT

Ref.no. ETL / CORP. EHS/ work permit / F-00

Rel. date: 29.07.2022

Rev. No. 00

Permit No.:		Date and Time: 18/06/2024
Cross Ref. / LOTO No.(If applicable):	CA200057	Date and Time: 18/06/2024
Permit Receiver name of Agency / contractor:	Prompt Enjy	Permit issuer name:
Work location / Department	LPOC	Plant / Section: L-6

In case of Emergency Siren receive : stop work immediately and walk toward safe assembly point & wait for next instruction.

I) Please carry out the following work : at location / machine :

SN	Job description (Pl mark right tick wherever applicable)	SN	Check List (Pl mark right tick wherever applicable)	Responsibility	Tick
1	Low- Working at Height (Above 1.8 mts & below 5 mts)	✓	1 Ensure safe means of access and egress at working area by stairways/ scaffolding/ladder	Work initiator	✓
2	High- Working at Height (Above 5 mts.)	✓	2 Ensure provision of permanent life line (vertical and horizontal) on rooftops of plant sheds	Work initiator	✓
3	Construction of New Shed/Building/Roof	X	3 Ensure all metal mesh fixed with screws provided to all fragile roof and skylight.	Work initiator	✓
4	Electrical cabling, mechanical fittings, piping work	X	4 Ensure metal mesh painted with yellow colour for easy identification.	Work initiator	✓
5	Colour / Painting / Fascade activity	X	5 Ensure side protection railing/parapet walls and walkway availability on roof /slabs	Work initiator	✓
6	Chimney painting/repairing/stack monitoring etc	X	6 Ensure Contractor Evaluation, Safety induction/tool box talk and ID card availability of all contractors workers.	HR & EHS	✓
7	Cleaning on roof/ leakage arresting/ Repairing of roof/ Sheet replacement	✓	7 Ensure contractor and their workers are competent to work at height as required.	Work initiator & EHS	✓
8	Solar panel cleaning/inspection/repairing at roof	X	8 Ensure only authorised person access to roof top with close supervision of ETL supervisor.	OH & PH	✓
9	Any other work (Please Specify)	✓	9 Ensure contractor worker must be medically fit to work at height and ensure Vertigo Test of contractors working above height of 5 meters.	HR & EHS	✓
			10 Ensure PPE and other approved equipment availability at site like - Full body harness with double lanyard(with shock absorber) , helmet, safety shoes, safety net to be fixed before start of work, rope length adjuster for full body harness etc.	Work initiator & EHS	✓
			11 Ensure rescue kit and trained rescue team availability at site for emergency evacuation of worker within 20 minutes if he fall from height and hanged with lanyard	Work initiator & EHS	✓
			12 Ensure working condition like proper platform, good weather condition. No work should be commence in rain, storm, high wind etc.	Work initiator & EHS	✓
			13 Ensure no overhead open live electrical cables availability at working location	Maintenance/ EHS	✓

II) Job Safety Analysis

Sr. No.	List of Activities	Hazard Identification	Risks level (H/M/L)	Available control measures	Check
①	FRP work	Eye Injury cut Injury Hand Injury	H H H	Safety belt Safety Helmate Safety shoes Safety Handgloves	OK

III) Contractor Information with Declaration (I have understand the hazard and risk involed in above activity, take full responsibility for training and safety of my employees as per EHS rules and regulation of ETL.)

Sr. No.	Name of contractor employees	Contractor ID Card	Valid till	Supervisor Name	Qualification / Experience	Signature of Permit holder	Remark
1	Raju Hiwale	062421012802		Kiran	B.com		
2		000000 gk		Sawade			
3			27/09/24				
4							
5							

(In case more than 5 contractor employee separate sheet need to attach)

IV) Authorization of Work Permit (I have examined the work description in the permit and job safety analysis found satisfactory)

Signature				
Name of Person				
Designation	Work Initiator	Area HOD	Plant HR (After verifying CSM)	Plant EHS / Operation Head / Production Head

IV) Work completion (Closure of Work Permit):

Work Start date and time	Work Complete date and time	Estimated Time	Work completed	Quality of work (Average, Satisfactory, Good)

V) Remark and Signature of User department on closure of work permit:
→ VIMP - Civil person & Security person must be present.

Note: Distribution of Permit copy : 1st Copy with contractor who is doing job ; 2nd Copy with EHS officer and 3rd Copy with Security