

General Work Permit

DATE: 05/06/24

This permit is valid from Date: 05/06/24 Time: 10:30 AM/PM To Date: 05/06/24 Up to Time: 19:30
 validity - Tick whichever applicable: Valid for a shift only (for 8 hours shift)

Shift - General Shift, Shift:1st, Shift:2nd, Shift:3rd General
 (This General work permit is applicable to all the works to be carried out by the external agencies and Internal agencies.)

Contractor Company Name: Sumit Enterprises

Work location - AT Building Partition
 Scope of work - Aluminium Partition

(Tick which ever applicable)

1	Painting Work	7	Oil coolant work
2	Machine Maintenance	8	Machine Modification/ Installation
3	Civil work	9	AMC service Maintenance
4	Carpenter work	10	Other work <input checked="" type="checkbox"/>
5	Electrical work		
6	Chemical work		

I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work.

Tick(✓) which is applicable

1	All Electrical/Mechanical Equipment properly checked	<input checked="" type="checkbox"/> Y / N / NA
2	Ladders 'A' type— in good condition with HSE Released (Fall height of below 2.5M)	<input checked="" type="checkbox"/> Y / N / NA
3	Proper illumination and ventilation provided at the work place	<input checked="" type="checkbox"/> Y / N / NA
4	Work area cordoned/barricaded.	<input checked="" type="checkbox"/> Y / N / NA
5	Fire extinguisher (CO2,ABC) available at the location	<input checked="" type="checkbox"/> Y / N / NA
6	Electrical connection/Disconnection done by authorized person	<input checked="" type="checkbox"/> Y / N / NA
7	LOTO provided	<input checked="" type="checkbox"/> Y / N / NA
8	Uses of PPE's in good working condition with ISI mark	<input checked="" type="checkbox"/> Y / N / NA
9	Work done by under supervision of supervisor	<input checked="" type="checkbox"/> Y / N / NA
10	COVID-19 prevention awareness provided i.e. use of qualified face mask and social distancing	<input checked="" type="checkbox"/> Y / N / NA

PERSONAL PROTECTIVE EQUIPMENT REQUIRED

SAFETY SHOES	SAFETY HELMET	SAFETY GOGGLES	EAR MUFF/PLUG	HAND GLOVES	OTHER (SPECIFY)
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	

NOTE - (Before signature)

- 1) AUTHORIZATION has been checked the location and arrangements made to execute the job in safer manner. During executing job the above mentioned safety measures has to be followed strictly by the executing company.
- 2) ACCEPTANCE BY JOB understand the work to be done, safety hazards involved, precaution required and my co-workers will strictly follow the all safety required instruction while executing the job.
- 3) DEPARTMENT SUPERVISOR understand that work is being carried out in my area and I authorized the work.

AUTHORISATION (Bosch cc and job Initiator)	ACCEPTANCE by job executing/external companies.	Information to Department Supervisor	location checked by HSE coordinators/ Clearance
Name: <u>N. I. Sankar</u>	Sup Name: <u>Arjun AK</u>	Name:	Name: <u>Sushant</u>
Date/Time: <u>5/6/24</u>	Date/Time: <u>05/06/24</u>	Date/Time:	Date/Time: <u>04-06-24</u>
SAP Number: <u>938123</u>	Signature: <u>[Signature]</u>	SAP Number:	SAP Number:
Signature: <u>[Signature]</u>	Mobile: <u>999201377</u>	Signature:	Signature: <u>[Signature]</u>
Mobile: <u>9827735</u>		Mobile:	Mobile: <u>+91-9180059628</u>

Spot check

Date /Time	checked by	Findings

Extension of permit -

Note: Before extending the permit, site re-examination shall be done and approved by Bosch CC and HSE.

Permit extended on up to Date & Time	AUTHORISATION (Bosch cc and job initiator)	ACCEPTANCE by job executing/external companies.	Information to department supervisor	Clearance from HSE

Completion of work - The above mentioned Activity is successfully completed and place is safe to resume

Contractor supervisor sign	Bosch cc/Job initiator signature	HSE Signature	Department supervisor Signature	Remarks (if any)

Note1: Site Emergency Contact Number – 021-3564-2800, 9130059628

General Work Permit

DATE - 05/06/24
Up to Time - 5.30 pm

This permit is valid from Date: 05/06/24 Time: 01:00 AM/PM To Date: 05/06/24

validity - Tick whichever applicable. Valid for a shift only (for 8 hours shift)

Shift - General Shift, Shift:1st, Shift:2nd, Shift:3rd General

(This General work permit is applicable to all the works to be carried out by the external agencies and Internal agencies.)

Contractor Company Name: Sunil Enterprises

Work location - AI Building

Scope of work - Acoustic Partition

(Tick which ever applicable)

1	Painting Work	7	Oil coolant work
2	Machine Maintenance	8	Machine Modification/ Installation
3	Civil work	9	AMC service Maintenance
4	Carpenter work	10	Other work <input checked="" type="checkbox"/>
5	Electrical work		
6	Chemical work		

I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work.

Tick (✓) which is applicable

1	All Electrical/Mechanical Equipment properly checked	Y/N/NA
2	Ladders 'A' type- in good condition with HSE Released (Fall height of below 2.5M)	Y/N/NA
3	Proper illumination and ventilation provided at the work place	Y/N/NA
4	Work area cordoned/barricaded	Y/N/NA
5	Fire extinguisher (CO2,ABC) available at the location	Y/N/NA
6	Electrical connection/Disconnection done by authorized person	Y/N/NA
7	LOTO provided	Y/N/NA
8	Uses of PPE's in good working condition with ISI mark	Y/N/NA
9	Work done by under supervision of supervisor	Y/N/NA
10	COVID-19 prevention awareness provided i.e. use of qualified face mask and social distancing	Y/N/NA

PERSONAL PROTECTIVE EQUIPMENT REQUIRED

SAFETY SHOES	SAFETY HELMET	SAFETY GOGGLES	EAR MUFF/PLUG	HAND GLOVES	OTHER (SPECIFY)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			

NOTE - (Before signature)

- 1) AUTHORIZATION has been checked the location and arrangements made to execute the job in safer manner. During executing job the above mentioned safety measures has to be followed strictly by the executing company.
- 2) ACCEPTANCE BY JOB understand the work to be done, safety hazards involved, precaution required and my co-workers will strictly follow the all safety required instruction while executing the job.
- 3) DEPARTMENT SUPERVISOR understand that work is being carried out in my area and I authorized the work.

AUTHORISATION (Bosch cc and job initiator)	ACCEPTANCE by job executing/external companies.	Information to Department Supervisor	location checked by HSE coordinators/ Clearance
Name: <u>N.L. Sankar</u> Date/Time: <u>05/06/24</u> SAP Number: <u>2053735</u> Signature: <u>[Signature]</u> Mobile: <u>9820035</u>	Sup Name: <u>Arjun A/A</u> Date/Time: <u>05/06/24</u> Signature: <u>[Signature]</u> Mobile: <u>99201179</u>	Name: <u>[Signature]</u> Date/Time: <u>[Signature]</u> SAP Number: <u>[Signature]</u> Signature: <u>[Signature]</u> Mobile: <u>[Signature]</u>	Name: <u>[Signature]</u> Date/Time: <u>05-09-24</u> SAP Number: <u>[Signature]</u> Signature: <u>[Signature]</u> Mobile: <u>+91-9130059628</u>

Spot check

Date /Time	checked by	Findings

Extension of permit -

Note: Before extending the permit, site re-examination shall be done and approved by Bosch CC and HSE.

Permit extended on up to Date & Time	AUTHORISATION (Bosch cc and job initiator)	ACCEPTANCE by job executing/external companies.	Information to department supervisor	Clearance from HSE

Completion of work - The above mentioned Activity is successfully completed and place is safe to resume

Contractor supervisor sign	Bosch cc/Job initiator signature	HSE Signature	Department supervisor Signature	Remarks (if any)

Note1: Site Emergency Contact Number - 021-3564-2800, 9130059628

Work at Height Permit (With a fall height of 2.5 meter or more)

Date: 25/11/23

This permit is valid from: Dt: 25/11/23 Time: 10:00 AM/PM To Dt: 25/11/23 Time: 5:30 PM Validity (Tick which ever applicable. Valid for a shift only (for 8 hours shift) Shift: Gen, Shift: I, Shift: II, Shift III. (This is applicable to work done by external agencies. Also, it is applicable Internally, when height work is done in non routine /non identified areas)		Job Location: <div style="font-size: 24px; font-family: cursive;">Eva Lab</div>														
A. Any other type of permit issued for the job:																
Job Description: EVA Lab Sprinkler work																
B. I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work																
1	Proper staging/scaffolding, platform & handrails provided	8 Workers are having past experience in working at height														
2	Staging/scaffolding supported properly and well secured	9 Proper illumination and ventilation provided at work place														
3	Toe board uniform & stable	10 Precautions taken to avoid electrical hazards														
4	Ladders 'A' type- In good condition with rubber grip ✓	11 Work area cordoned/barricaded.														
5	Elevated levels are provided with safe access and egress	12 Persons working around the area of work are informed about work and safety precautions														
6	safety belts/ body harnesses/other PPEs meeting IS standards are used ✓	13 Safety belt is always connected to the anchorage located above the worker(not at the same height or below the level of worker)														
7	Safety net provided (if the job is more than 6 meter or as per the risk involved with job)	14 Precautions taken to avoid falling of tools														
C. PERSONAL PROTECTIVE EQUIPMENT REQUIRED																
Safety Helmet ✓	Safety Shoes ✓	Full Body Harness	Safety Goggle ✓	Ear Muff	Retractable Fall arrestor	Others(specify) ✓										
D. Acceptance of Permit conditions by the executing/external agency				E. Bosch CC and Job Initiator												
I agree and undertake to abide, without fail, the above mentioned safety requirements while carrying out the works, either by myself or through my agent, employee, representative. Any breach or failure in complying with even a single safety regulation mentioned above which may result in any loss or damage to life or property, I shall be solely responsible.				The above job location has been checked and the arrangements made to execute the job in safer manner. During executing the job the above mentioned safety measures has to be followed strictly by the executing company.												
Contractor Name: <u>Sumit Enterprises</u>				Bosch CC Signature: <u>[Signature]</u> Job Initiator Signature: <u>[Signature]</u> Date/Time:												
Contractor Supervisor Name: <u>Satyajit</u> Signature: <u>[Signature]</u>				F. Department Supervisor:												
Date/ Time: Mobile No: <u>9823308050</u>				I'm aware of the job being executed & permit the job execution, subject to the full compliance with the above-mentioned conditions/safety measures.												
Contract workers :				Name: E. No: Signature:												
<table style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">Name</th> <th style="width: 10%;">Signature</th> </tr> <tr> <td>01. Deepak Ankush - <u>[Signature]</u></td> <td></td> </tr> <tr> <td>02. Anil kushwaha - <u>[Signature]</u></td> <td></td> </tr> <tr> <td>03. Subhash shelar - <u>[Signature]</u></td> <td></td> </tr> <tr> <td>04. Durgesh sharma - <u>[Signature]</u></td> <td></td> </tr> </table>				Name	Signature	01. Deepak Ankush - <u>[Signature]</u>		02. Anil kushwaha - <u>[Signature]</u>		03. Subhash shelar - <u>[Signature]</u>		04. Durgesh sharma - <u>[Signature]</u>		Dept: Date/ Time: Ph No:		
Name	Signature															
01. Deepak Ankush - <u>[Signature]</u>																
02. Anil kushwaha - <u>[Signature]</u>																
03. Subhash shelar - <u>[Signature]</u>																
04. Durgesh sharma - <u>[Signature]</u>																
G. Responsible HSE function:				I have verified the area specified above and permission is given for the work to start, subject to the full compliance with the above-mentioned conditions/safety measures.												
Name: <u>Tanvi</u> <u>[Signature]</u>				Authorised Signature - HSE - Function: <u>[Signature]</u>												
Date/ Time: <u>25/11/23</u> Ph No:				Date/ Time:												
H Spot Checks by Bosch CC:																
Date/Time		Who(checked)		Findings												
<u>25/11/23</u>		<u>Tanvi</u>														
		<u>Tanvi</u>														
I Extension of permit : Note: * Before extending the permit, site re-examination shall be done and permit is approved by HSE																
Date	Signature of Executing /external agency Supervisor	Signature of Job initiator (Bosch CC)	Department supervisor	Permit Extended up to (Date/Time)	*Signature of HSE/Safety supervisor											
<u>25/11/23</u>	<u>[Signature]</u>	<u>[Signature]</u>		<u>9:00</u>	<u>[Signature]</u>											
J Completion of Work: The above mentioned activity is successfully completed and the place is safe resume																
Contractor supervisor Signature	Bosch CC Signature	Job Initiator Signature	Department supervisor Signature													
<u>[Signature]</u>	<u>[Signature]</u>		<u>[Signature]</u>													

Note1: In case Bosch CC and Job Initiator are same, single signature from him is acceptable
Note2: Site Emergency Contact Number - 021-3564-2800, 9130059628
Note3: This work permit system needs to be followed for a lesser height whenever there is a more stringent local statutory requirement that is applicable. (e.g.: factory rules etc.)

Work at Height Permit (With a fall height of 2.5 meter or more) Date:

This permit is valid from: Dt: 15/08/23 Time: 10:00 AM/PM To: Dt: 15/08/23 Time: 5:30 Validity (Tick which ever applicable. Valid for a shift only (for 8 hours shift) Shift: Gen, Shift: I, Shift: II, Shift: III. (This is applicable to work done by external agencies. Also, It is applicable Internally, when height work is done in non routine /non identified areas)		Job Location: CC Building AT Building																						
A. Any other type of permit issued for the job:																								
Job Description: Silicon Filling in Window & Wall Gaps																								
B. I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work																								
1	Proper staging/scaffolding, platform & handrails provided	8 Workers are having past experience in working at height <input checked="" type="checkbox"/>																						
2	Staging/scaffolding supported properly and well secured	9 Proper illumination and ventilation provided at work place																						
3	Toe board uniform & stable	10 Precautions taken to avoid electrical hazards																						
4	Ladders 'A' type- in good condition with rubber grip <input checked="" type="checkbox"/>	11 Work area cordoned/barricaded.																						
5	Elevated levels are provided with safe access and egress	12 Persons working around the area of work are informed about work and safety precautions																						
6	safety belts/ body harnesses/other PPEs meeting IS standards are used <input checked="" type="checkbox"/>	13 Safety belt is always connected to the anchorage located above the worker (not at the same height or below the level of worker)																						
7	Safety net provided (if the job is more than 6 meter or as per the risk involved with job)	14 Precautions taken to avoid falling of tools																						
C. PERSONAL PROTECTIVE EQUIPMENT REQUIRED																								
<input checked="" type="checkbox"/> Safety Helmet	<input checked="" type="checkbox"/> Safety Shoes	<input checked="" type="checkbox"/> Full Body Harness																						
<input type="checkbox"/> Safety Goggle	<input type="checkbox"/> Ear Muff	<input type="checkbox"/> Retractable Fall arrestor																						
Others (specify)																								
D. Acceptance of Permit conditions by the executing/external agency I agree and undertake to abide, without fail, the above mentioned safety requirements while carrying out the works, either by myself or through my agent, employee, representative. Any breach or failure in complying with even a single safety regulation mentioned above which may result in any loss or damage to life or property, I shall be solely responsible. Contractor Name: Sumit Enterprises Contractor Supervisor Name: Arman Ali Signature: <i>Arman Ali</i> Mobile No: _____ Date/ Time: _____ Contract workers : <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Name</th> <th style="width:70%;">Signature</th> </tr> </thead> <tbody> <tr><td>01. Sameer Shaik</td><td></td></tr> <tr><td>02. Ibrar</td><td></td></tr> <tr><td>03. Sakir</td><td></td></tr> <tr><td>04. Sameer</td><td></td></tr> <tr><td>05. Sameer</td><td></td></tr> <tr><td>06. Sameer</td><td></td></tr> <tr><td>07. Sameer</td><td></td></tr> <tr><td>08. Sameer</td><td></td></tr> <tr><td>09. Sameer</td><td></td></tr> <tr><td>10. Sameer</td><td></td></tr> </tbody> </table>		Name	Signature	01. Sameer Shaik		02. Ibrar		03. Sakir		04. Sameer		05. Sameer		06. Sameer		07. Sameer		08. Sameer		09. Sameer		10. Sameer		E. Bosch CC and Job Initiator The above job location has been checked and the arrangements made to execute the job in safer manner. During executing the job the above mentioned safety measures has to be followed strictly by the executing company. Bosch CC Signature: _____ Date/Time: _____ Job Initiator Signature: <i>Arman Ali</i> Date/Time: 15/08/23
Name	Signature																							
01. Sameer Shaik																								
02. Ibrar																								
03. Sakir																								
04. Sameer																								
05. Sameer																								
06. Sameer																								
07. Sameer																								
08. Sameer																								
09. Sameer																								
10. Sameer																								
F. Department Supervisor: I'm aware of the job being executed & permit the job execution, subject to the full compliance with the above-mentioned conditions/safety measures. Name: _____ E. No: _____ Signature: _____ Dept: _____ Date/ Time: _____ Ph No: _____		G. Responsible HSE function: I have verified the area specified above and permission is given for the work to start, subject to the full compliance with the above-mentioned conditions/safety measures. Name: Tanvir Inamdar Date/ Time: 15/08/23 Ph No: _____ Authorised Signature: <i>Tanvir Inamdar</i> HSE - Function																						
H Spot Checks by Bosch CC:																								
Date/Time	Who (checked)	Findings																						
15/08/23	Tanvir																							
	Arman Ali																							
I Extension of permit : Note: * Before extending the permit, site re-examination shall be done and permit is approved by HSE																								
Date	Signature of Executing /external agency Supervisor	Signature of Job Initiator (Bosch CC)	Department supervisor	Permit Extended up to (Date/Time)	*Signature of HSE/Safety supervisor																			
J Completion of Work: The above mentioned activity is successfully completed and the place is safe resume																								
Contractor supervisor Signature	Bosch CC Signature	Job Initiator Signature	Department supervisor Signature																					

Note1: In case Bosch CC and job initiator are same, single signature from him is acceptable
Note2: Site Emergency Contact Number – 021-3564-2800, 9130059628
Note3: This work permit system needs to be followed for a lesser height whenever there is a more stringent local statutory requirement that is applicable. (e.g.: factory rules etc.)

Work at Height Permit (With a fall height of 2.5 meter or more) Date:

	This permit is valid from Dt: 14/08/23 Time: 10:30 AM/PM To Dt: 14/08/23 Time: 5:30 AM/PM			Job Location: Tech centre CC Building AT Building		
Validity (Tick which ever applicable. Valid for a shift only(for 8 hours shift) Shift: Gen, Shift: I, Shift: II, Shift III (This is applicable to work done by external agencies. Also, it is applicable internally, when height work is done in non routine /non identified areas)						
A. Any other type of permit issued for the job: Job Description: <u>silicon filling in window & wall gaps</u>						
B. I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work						
1	Proper staging/scaffolding, platform & handrails provided	8	Workers are having past experience in working at height	9	Proper illumination and ventilation provided at work place	
2	Staging/scaffolding supported properly and well secured	9		10	Precautions taken to avoid electrical hazards	
3	Toe board uniform & stable	10		11	Work area cordoned/barricaded.	
4	Ladders 'A' type- in good condition with rubber grip	11		12	Persons working around the area of work are informed about work and safety precautions	
5	Elevated levels are provided with safe access and egress	12		13	Safety belt is always connected to the anchorage located above the worker(not at the same height or below the level of worker)	
6	safety belts/ body harnesses/other PPEs meeting IS standards are used	13		14	Precautions taken to avoid falling of tools	
7	Safety net provided (if the job is more than 6 meter or as per the risk involved with job)	14				
C. PERSONAL PROTECTIVE EQUIPMENT REQUIRED						
	Safety Helmet	Safety Shoes	Full Body Harness	Safety Goggle	Ear Muff	Retractable Fall arrestor
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Others(specify)
D. Acceptance of Permit conditions by the executing/external agency				E. Bosch CC and Job Initiator		
I agree and undertake to abide, without fail, the above mentioned safety requirements while carrying out the works, either by myself or through my agent, employee, representative. Any breach or failure in complying with even a single safety regulation mentioned above which may result in any loss or damage to life or property, I shall be solely responsible.				The above job location has been checked and the arrangements made to execute the job in safer manner. During executing the job the above mentioned safety measures has to be followed strictly by the executing company.		
Contractor Name: <u>Sumit Enterprises</u>				Bosch CC Signature: _____ Date/Time: _____		
Contractor Supervisor Name: <u>Arman Ali</u> Signature: <u>[Signature]</u> Mobile No: _____				Job Initiator Signature: <u>[Signature]</u> Date/Time: <u>14/8/23</u>		
Contract workers : <u>9792875992</u>				F. Department Supervisor:		
Name Signature				I'm aware of the job being executed & permit the job execution, subject to the full compliance with the above-mentioned conditions/safety measures.		
01. Sameer Shaik	[Signature]	Name: _____ E. No: _____ Signature: _____				
02. Sameer	[Signature]	Dept: _____ Date/ Time: _____ Ph No: _____				
03. Ibran	[Signature]	G. Responsible HSE function:				
04. Sakir	[Signature]	I have verified the area specified above and permission is given for the work to start, subject to the full compliance with the above-mentioned conditions/safety measures.				
05. _____	[Signature]	Name: <u>Tanvir Khan dar</u> Authorised Signature HSE - Function				
06. _____	[Signature]	Date/ Time: <u>14.8.23</u> Ph No: _____				
H Spot Checks by Bosch CC:						
	Date/Time	Who(checked)	Findings			
	14.8.23	Tanvir				
		Fremder				
I Extension of permit : Note: * Before extending the permit, site re-examination shall be done and permit is approved by HSE						
	Date	Signature of Executing /external agency Supervisor	Signature of job initiator (Bosch CC)	Department supervisor	Permit Extended up to (Date/Time)	*Signature of HSE/Safety supervisor
J Completion of Work: The above mentioned activity is successfully completed and the place is safe resume.						
	Contractor supervisor Signature	Bosch CC Signature	Job Initiator Signature	Department supervisor Signature		

Note1: In case Bosch CC and Job Initiator are same, single signature from him is acceptable
Note2: Site Emergency Contact Number – 021-3564-2800, 9130059628
Note3: This work permit system needs to be followed for a lesser height whenever there is a more stringent local statutory requirement that is applicable. (e.g.: factory rules etc.)



Work at Height Permit (With a fall height of 2.5 meter or more) Date:

This permit is valid from: Dt: 18/10/23 Time: 10:30 AM/PM To: Dt: 18/10/23 Time: 10:30

Validity (Tick which ever applicable. Valid for a shift only (for 8 hours shift)
 Shift: Gen, Shift: I, Shift: II, Shift: III.
 (This is applicable to work done by external agencies. Also, it is applicable internally, when height work is done in non routine / non identified areas)

Job Location: EVA Lab

A. Any other type of permit issued for the job:

Job Description:

B. I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work

1	Proper staging/scaffolding, platform & handrails provided ✓	8	Workers are having past experience in working at height ✓
2	Staging/scaffolding supported properly and well secured	9	Proper illumination and ventilation provided at work place
3	Toe board uniform & stable	10	Precautions taken to avoid electrical hazards
4	Ladders 'A' type- In good condition with rubber grip	11	Work area cordoned/barricaded.
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7	Safety net provided (if the job is more than 6 meter or as per the risk involved with job)	14	Precautions taken to avoid falling of tools

C. PERSONAL PROTECTIVE EQUIPMENT REQUIRED

Safety Helmet	Safety Shoes	Full Body Harness	Safety Goggle	Ear Muff	Retractable Fall arrestor	Others (specify)
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D. Acceptance of Permit conditions by the executing/external agency

I agree and undertake to abide, without fail, the above mentioned safety requirements while carrying out the works, either by myself or through my agent, employee, representative. Any breach or failure in complying with even a single safety regulation mentioned above may result in any loss or damage to life or property, I shall be responsible.

Contractor Name: Sunil Enterprises

Contractor Supervisor Name: Arman Ali Signature: [Signature]

Date/ Time: 10:30 Mobile No: 9792871992

Contract workers :

Name	Signature
01. <u>Shyamsundar</u>	
02. <u>Baalyum</u>	
03.	
04.	
05.	
06.	
07.	
08.	
09.	
10.	

E. Bosch CC and Job Initiator

The above job location has been checked and the arrangements made to execute the job in safer manner. During executing the job the above mentioned safety measures has to be followed strictly by the executing company.

Bosch CC Signature: [Signature] Date/Time: 10:15am 18-10-2023

Job Initiator Signature: [Signature] Date/Time: 10:15am 18-10-2023

F. Department Supervisor:

I'm aware of the job being executed & permit the job execution, subject to the full compliance with the above-mentioned conditions/safety measures.

Name: AJP Misal E. No: 393312 Signature: [Signature]

Dept: _____ Date/ Time: _____ Ph No: 2-25523

G. Responsible HSE function:

I have verified the area specified above and permission is given for the work to start, subject to the full compliance with the above-mentioned conditions/safety measures.

Name: Tanvi Inamdar Authorised Signature HSE - Function: [Signature]

Date/ Time: 18/10/23 Ph No: _____

H Spot Checks by Bosch CC:

Date/Time	Who (checked)	Findings
<u>18/10/23</u>	<u>Tanvi</u>	
	<u>Saamdar</u>	

I Extension of permit:
 Note: * Before extending the permit, site re-examination shall be done and permit is approved by HSE

Date	Signature of Executing /external agency Supervisor	Signature of Job Initiator (Bosch CC)	Department supervisor	Permit Extended up to (Date/Time)	*Signature of HSE/Safety supervisor

J Completion of Work: The above mentioned activity is successfully completed and the place is safe resume

Contractor supervisor Signature	Bosch CC Signature	Job Initiator Signature	Department supervisor Signature

Note1: In case Bosch CC and job initiator are same, single signature from him is acceptable
Note2: Site Emergency Contact Number – 021-3564-2800, 9130059628
Note3: This work permit system needs to be followed for a lesser height whenever there is a more stringent local statutory requirement that is applicable. (e.g.: factory rules etc.)



BOSCH

Sr. No.: 1769

General Work Permit

This permit is valid from Date: 26/12/2023 Time: 11:30 AM/PM To Date: 26/12/23 Up to Time: 05:30 PM
Validity - Tick whichever applicable. Valid for a shift only (for 8 hours shift)
Shift - General Shift, Shift: 1st, Shift: 2nd, Shift: 3rd

(This General work permit is applicable to all the works to be carried out by the external agencies and Internal agencies.)

Contractor Company Name: Sunil Enterprises

Work location - Bile To PSM Gate Road work

Scope of work -

(Tick which ever applicable)			
1	Painting Work	7	Oil coolant work
2	Machine Maintenance	8	Machine Modification/Installation
3	Civil work	9	AMC service Maintenance
4	Carpenter work	10	Other work
5	Electrical work		
6	Chemical work		

I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work.

Tick(✓) which is applicable

- All Electrical/Mechanical Equipment properly checked Y/W/NA-
- Ladders 'A' type- In good condition with HSE Released (Fall height of below 2.5M) Y/W/NA
- Proper illumination and ventilation provided at the work place Y/N/NA
- Work area cordoned/barricaded. Y/N/NA-
- Fire extinguisher (CO2,ABC) available at the location-Y/N/NA
- Electrical connection/Disconnection done by authorized person Y/N/NA-
- LOTO provided Y/N/NA
- Uses of PPE's in good working condition with ISI mark Y/N/NA-
- Work done by under supervision of supervisor Y/N/NA-
- COVID-19 prevention awareness provided i.e. use of qualified face mask and social distancing Y/N/NA

PERSONAL PROTECTIVE EQUIPMENT REQUIRED

SAFETY SHOES	SAFETY HELMET	SAFETY GOGGLES	EAR MUFF/PLUG	HAND GLOVES	OTHER (SPECIFY)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

NOTE - (Before signature)

- AUTHORISATION has been checked the location and arrangements made to execute the job in safer manner. During executing job the above mentioned safety measures has to be followed strictly by the executing company.
- ACCEPTANCE BY JOB understand the work to be done, safety hazards involved, precaution required and my co-workers will strictly follow the all safety required instruction while executing the job.
- DEPARTMENT SUPERVISOR understand that work is being carried out in my area and I authorized the work.

AUTHORISATION	(Bosch cc and Job Initiator)	ACCEPTANCE	by Job executing/external companies.	Information to Supervisor	Department	location checked by HSE coordinators/ Clearance
Name:	<u>R. S. JAYARAJ</u>	Sup Name:	<u>Sethy P. K. K.</u>	Name:	<u>T. JAYARAJ</u>	<u>T. JAYARAJ</u>
Date/Time:	<u>26/12/23</u>	Date/Time:	<u>26/12/23</u>	Date/Time:	<u>26/12/23</u>	<u>26/12/23</u>
SAP Number:	<u>130059628</u>	Signature:	<u>[Signature]</u>	SAP Number:	<u>130059628</u>	<u>130059628</u>
Mobile:	<u>9130029112</u>	Mobile:	<u>9823305050</u>	Signature:	<u>[Signature]</u>	<u>[Signature]</u>
				Mobile:	<u>+91-9130059628</u>	

Spot check

Date /Time	checked by	Findings
<u>26/11/23</u>	<u>T. JAYARAJ</u>	
	<u>[Signature]</u>	

Extension of permit -

Note: Before extending the permit, site re-examination shall be done and approved by Bosch CC and HSE.

Permit extended on up to Date & Time

AUTHORISATION (Bosch cc and Job Initiator)	ACCEPTANCE by Job executing/external companies.	Information to department supervisor	Clearance from HSE
<u>[Signature]</u>	<u>[Signature]</u>		

Completion of work - The above mentioned Activity is successfully completed and place is safe to resume

Contractor supervisor sign	Bosch cc/Job Initiator signature	HSE signature	Department supervisor Signature	Remarks (if any)
<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	

Note: Site Emergency Contact Number - 021-3564-2800, 9130059628

General Work Permit

This permit is valid from Date: 25/12/2023 Time: 10:00 AM/PM To Date: 25/12/2023 Up to Time: 05:30 PM
 DATE -
 validity - Tick whichever applicable. Valid for a shift only (for 8 hours shift)
 Shift - General Shift, Shift:1st, Shift:2nd, Shift:3rd
 (This General work permit is applicable to all the works to be carried out by the external agencies and Internal agencies.)
 Contractor Company Name: Samit Enterprises
 Work location - CC
 Scope of work - Civil work (Road widening) - B11E to Pami 9021
 (Tick which ever applicable)

1	Painting Work	7	Oil coolant work
2	Machine Maintenance	8	Machine Modification/ Installation
3	Civil work	9	AMC service Maintenance
4	Carpenter work	<input checked="" type="checkbox"/>	Other work
5	Electrical work		
6	Chemical work		

I (Bosch contractor coordinator and contractor) agree for the following safety precautions which are ensured while executing the described work.

Tick (✓) which is applicable

1	All Electrical/Mechanical Equipment properly checked	Y/N/NA
2	Ladders 'A' type- in good condition with HSE Released (Fall height of below 2.5M)	Y/N/NA
3	Proper illumination and ventilation provided at the work place	Y/N/NA
4	Work area cordoned/barricaded.	Y/N/NA
5	Fire extinguisher (CO2,ABC) available at the location	Y/N/NA
6	Electrical connection/Disconnection done by authorized person	Y/N/NA
7	LOTO provided	Y/N/NA
8	Uses of PPE's in good working condition with ISI mark	Y/N/NA
9	Work done by under supervision of supervisor	Y/N/NA
10	COVID-19 prevention awareness provided i.e. use of qualified face mask and social distancing	Y/N/NA

PERSONAL PROTECTIVE EQUIPMENT REQUIRED

SAFETY SHOES	SAFETY HELMET	SAFETY GOGGLES	EAR MUFF/PLUG	HAND GLOVES	OTHER (SPECIFY)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

NOTE - (Before signature)

- 1) AUTHORIZATION has been checked the location and arrangements made to execute the job in safer manner. During executing job the above mentioned safety measures has to be followed strictly by the executing company.
- 2) ACCEPTANCE BY JOB understand the work to be done, safety hazards involved, precaution required and my co-workers will strictly follow the all safety required instruction while executing the job.
- 3) DEPARTMENT SUPERVISOR understand that work is being carried out in my area and I authorized the work.

AUTHORISATION (Bosch cc and job initiator)	ACCEPTANCE by job executing/external companies	Information to Supervisor	Department	location checked by HSE coordinators/ Clearance
Name: <u>P. Sathyan</u> Date/Time: <u>25/12/23</u> SAP Number: <u>10219162</u> Signature: <u>[Signature]</u> Mobile: <u>982330050</u>	Sup Name: <u>Sathyan</u> Date/Time: <u>[Signature]</u> Signature: <u>[Signature]</u> Mobile: <u>982330050</u>	Name: <u>Tanvir</u> Date/Time: <u>25/12/23</u> SAP Number: <u>[Signature]</u> Signature: <u>[Signature]</u> Mobile: <u>91-9130059628</u>		Name: <u>Tanvir Inamdar</u> Date/Time: <u>25/12/23</u> SAP Number: <u>[Signature]</u> Signature: <u>[Signature]</u> Mobile: <u>91-9130059628</u>

Spot check

Date /Time	checked by	Findings
<u>25/12/23</u>	<u>Tanvir Inamdar</u>	

Extension of permit -

Note: Before extending the permit, site re-examination shall be done and approved by Bosch CC and HSE.

Permit extended on up to Date & Time	AUTHORISATION (Bosch cc and job initiator)	ACCEPTANCE by job executing/external companies.	Information to department supervisor	Clearance from HSE
<u>25/12/23 10 PM</u>	<u>[Signature]</u>	<u>[Signature]</u>		<u>10 PM [Signature]</u>

Completion of work - The above mentioned Activity is successfully completed and place is safe to resume

Contractor supervisor sign	Bosch cc/Job Initiator signature	HSE Signature	Department supervisor Signature	Remarks (if any)
<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	

Site Emergency Contact Number - 021-3564-2800, 9130059628