

## Work Permit

Fill out completely prior to any of the Job Specific Task(s) listed below are performed.

Environmental and Occupational Health and Safety (EOHS) Phone: 330-972-6866 Email: [eohs@uakron.edu](mailto:eohs@uakron.edu)

**\*\* All accidents or injuries involving contractors should immediately be reported to UAPD at 330-972-2911 \*\***

Date: \_\_\_\_\_

Company Name \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Fax \_\_\_\_\_

Business After Hours Contact Name \_\_\_\_\_

Business After Hours Contact Number \_\_\_\_\_

Project Supervisor \_\_\_\_\_ Email \_\_\_\_\_

Project Supervisor Contact Info Office \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

### University Point of Contact

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Department \_\_\_\_\_

### **Prior to starting work:**

- Prior to starting work at The University of Akron, the contractor shall have a Safety Program in place to comply with applicable OSHA standards.
- SDS shall be submitted to the EOHS Department along with maintaining a copy at the work site.
- Work areas are to be identified in accordance with OSHA 29 CFR 1926 Subpart G Signage, Signals and Barricades.
- For projects that involve cutting or penetrating walls and/or structural elements, contact EOHS for information about Asbestos and/or Lead.

Location of Project, include building name, rooms or areas that work will be occurring in:

Nature and/or Description of Work \_\_\_\_\_

Start Date \_\_\_\_\_ Approx. End Date \_\_\_\_\_

Number of Employees on Site \_\_\_\_\_ List the hours work will take place: From \_\_\_\_\_ To \_\_\_\_\_

Will there be any interruption of building services?  Yes  No If yes, please give details below:

Any interruptions must be coordinated through the University point of contact and PFOC. Detail how this will be accomplished:

**Additional Requirement:** Any interruptions or impairments of the Fire Alarm or Suppression Systems require additional notification to EOHS.

**Job Specific Task(s) Check Applicable**

- |  |   |
|--|---|
| <input type="checkbox"/> Heavy Equipment   | <input type="checkbox"/> Confined Space Subpart C       |
| <input type="checkbox"/> Chemicals: 29 CFR 1910.120  | <input type="checkbox"/> Electrical Subpart K           |
| <input type="checkbox"/> Elevated Work Subpart L   | <input type="checkbox"/> Excavation/Trenching Subpart P |
| <input type="checkbox"/> Fall Protection Subpart M   | <input type="checkbox"/> Lock Out Tag Out Subpart K     |
| <input type="checkbox"/> Ladders/Scaffolds Subpart L                                       |   |
| <input type="checkbox"/> Roof Work Subpart M (Contact PFOC for additional requirements)    |   |
| <input type="checkbox"/> Structural Work (Contact EOHS & PFOC for additional requirements) |   |
| <input type="checkbox"/> Hot Work Subpart J (Contact EOHS for additional requirements)     |   |

**Other, please detail:** \_\_\_\_\_

**It is the contractors responsibility to identify the safety or OSHA standard or regulations that are applicable and proceed accordingly.**

Name of Contractors Safety Officer \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

**General Items**

- Buildings may be equipped with fire alarm and smoke detection system. Work creating dust, steam, smoke or vapors must be reported to UAPD prior to starting the work.
- All vehicles are prohibited from accessing the University pedestrian areas without permission from UAPD.
- All Occupational and Health hazards are to be reported immediately to the UAPD at 330-972-2911.
- Parking Permits are required.
- Some buildings contain hazardous materials. All questions relating to work in those buildings must be directed to the department of EOHS.

**IMPORTANT CONTACT NUMBERS**

University Police Department (UAPD)	330-972-2911
Physical Facilities (PFOC)	330-972-7415
Environmental Occupational Health & Safety (EOHS)	330-972-6866

**Please save completed form and email to:** [egreen1@uakron.edu](mailto:egreen1@uakron.edu) , [eohs@uakron.edu](mailto:eohs@uakron.edu) , [sirish@uakron.edu](mailto:sirish@uakron.edu) [uapd@uakron.edu](mailto:uapd@uakron.edu);[vongunt@uakron.edu](mailto:vongunt@uakron.edu) , and

**Point of Contact should be added as a recipient.**

**University Point of Contact:** Please see PO Remarks

**For non-emergency situations please send this form within 48 hours.**