

Confined Space Evaluation Form

Section 1: Space Details * Please include a drawing of the profile of the identified space.

Date of Evaluation:	Dimensions (H:W:L):
Location of Space:	Description of Space:
Work likely to be performed:	
How many times are employees likely to enter the space in a year:	
What positions are most likely to enter the space:	

Section 2: Confined Space Determination Please mark Yes or No to the question.

YES NO

		1. Can a person fit inside the space to perform work?
		2. Does the space have limited or restricted access?
		3. When the space was created, it wasn't designed for a person to work in? (Lights and ventilation not present?)

If the response to all three questions above was YES, the space being evaluated is a confined space. If any question answered was NO, the space in question does not meet the confined space criteria. Please use the sections below to evaluate the potential hazards in confined spaces and to determine if a permit is necessary to enter the space.

Section 3: Physical Hazard Identification

YES	NO	Hazard (Use the space below each hazard to briefly describe how to eliminate it before entry.)
		Stored Energy – Electrical equipment or potential for shock
		Stored Energy – Hydraulic/Pneumatic
		Stored Energy – Gravity/Mechanical
		Safety Hazards – Engulfment/Immersion (causes death by crushing, constriction, or drowning)
		Safety Hazards - Trapped or tangled by the shape of the space
		Safety Hazards – Slip, Trip, Fall
		Safety Hazards – Visibility
		Physical Agents – Temperature (hot/cold – air temp and surfaces)
		Physical Agents – Noise/Vibration

		Physical Agents – Biologic hazards (could be respirable too)
		Physical Agents – Chemical hazards (could be respirable too)
		Physical Agents – Radiation (Ionizing & non-ionizing)
		Other
		Other

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Section 4: Atmospheric Hazard Identification (must be re-evaluated before entry)

Hazards	Does the hazard exist or have the potential to develop?	Baseline Levels:	How can the hazard be eliminated or controlled?
Oxygen Deficiency or Enrichment(<19.5% or >23.5%)			
Fire/Explosion (%LEL)			
Carbon Monoxide (CO), >35ppm			
Hydrogen Sulfide (H2S), >10ppm			
Could material in the space be decomposing? (eg Biological Action)			
Is there a chemical process that occurs in the space?			
Are their residues of a chemical in the space?			
Toxic 1: _____ • PEL:			
Toxic 2: _____ • PEL:			

Section 5: Hazardous Confined Space Determination

YES	NO	Is the space identified above a hazardous (permit-required) confined space? (please circle)
Reason for evaluation:		
Name of employee(s) performing evaluation (please print):		