**Mission Success Starts With Safety** 





# Monthly SSC Construction Contractor Meeting:

## **Confined Space Permits**

February 04, 2021





## **Confined Space Permits**

- SCWI-8715-0004 SSC Confined Space Entry Program
- SSC-576 SSC Confined Space Entry Permit:
  - Shall be used for all SSC permit required confined space entries by NASA, NASA Prime Contractors, and NASA Direct Construction Contractors.
  - Shall be signed/approved by the confined space supervisor, emergency rescue team lead, and applicable Safety office prior to performing work in a permit-required confined space.
  - Shall be maintained at the entry point or made available by other equally effective means.







### **Confined Space Permits**

- Post Entry Audit (SCWI-8715-0004, Section 7):
  - "...shall be performed on the terminated/cancelled confined space entry permit (SSC Form 576), to assess compliance with this SCWI. Sections 1 through 9 of the Confined Space Entry Permit, SSC Form 576, shall be reviewed to ensure the permit was properly completed. Section 10 of the SSC Form 576, Confined Space Entry Permit, will be initialed and dated by the person performing the quality assurance audit. If a discrepancy or an opportunity for improvement is noted the "corrective action required" block is checked and addressed in Section 10 of the SSC Form 576, Confined Space Entry Permit."

#### **Mission Success Starts With Safety**

AUTHORIZED ATTENDANT: I reviewed the confined space entry conditions/requirements and understand my Attendant roles & results and understand my Attendant roles & results and understand my Attendant roles & results and resu



#### SSC-576



Blanking or Blocking Lockout / Tagout Purge & Clean Inert External Barrier Other: Itty HAZARDS CONTROLLED (Answer All Questions) Itty HAZARDS CONTROLLED (Answer all Q			s Time: //Stennis Work Request/MAXIMO #)					
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RE-ENTRY PROCEDURES (Check Applicable) Station Methods: Station Methods: Station Methods: Station Of Station Purge & Clean Unge & Clean Station Inert Station Barrier Other: Station Barrier Other: Station Station Station: (All Methods Stations) Station Stations(Stations) Stations(Stations(Stations) Stations(Stations) Stations(Stations(Stations) Stations(Stations(Stations) Stations(Stations(Stations(Stations) Stations(Stations(Stations) Stations(Stations(Stations(Stations) Stations(	Communication Meth Visual Voice Radio Tug Rope							
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Iation Methods: Control Leg Argent Control Leg Arge	Visual Voice Radio Tug Rope	ods:	Vantilation Mathods					
Blanking or Blocking       [         Lockouf, / Tagout       [         Purge & Clean       [         Inert       [         External Barrier       [         Other:       [         TITY HAZARDS CONTROLLED (Answer All Questions)         Incipion of all Potential Hazards Requiring Evaluation:	Visual Voice Radio Tug Rope	ods:	Ventilation Methode:					
Lockout / Tagout Purge & Clean Inert External Barrier Other: Other: UTRY HA2RDS CONTROLLED (Answer All Questions) cription of all Potential Hazards Requiring Evaluation: (All	Voice Radio Tug Rope							
Purge & Clean Inert External Barrier Other: Other: UTRY INARNDS CONTROLLED (Answer All Questions) UTRY INARNDS CONTROLLED (Answer All Questions)	Radio Tug Rope		Initial (30 minute minimum)					
I Inert External Barrier Other: VTRY HAZARDS CONTROLLED (Answer All Questions) Corption of all Potential Hazards Requiring Evaluation: (All	Tug Rope		General Ventilation Maintained					
External Barrier Other: VTRY HAZARDS CONTROLLED (Answer All Questions) corption of all Potential Hazards Regultring Evaluation: (All			Method:					
Other: NTRY HAZARDS CONTROLLED (Answer All Questions) scription of all Potential Hazards Requiring Evaluation: (All								
NTRY HAZARDS CONTROLLED (Answer All Questions) scription of all Potential Hazards Requiring Evaluation: (All								
NTRY HAZARDS CONTROLLED (Answer All Questions) scription of all Potential Hazards Requiring Evaluation: (All								
scription of all Potential Hazards Requiring Evaluation: (All			I					
	NO answers must be	corrected prior to entry)						
es No								
The Oxygen levels are between 19.5% and 23.								
Are asphyxiants blocked/blanked from entering								
There are no flammable gases/vapors and/or o		es in the space. List if foun	id:					
There are no toxic gases/vapors present. List if Atmospheric monitoring is in place (document i		t sendless is seating (*)						
Atmospheric monitoring is in place (document i There are no corrosive hazards present in the		t readings in section 8)						
All electrical hazards are eliminated or controlle								
All mechanical hazards/stored energy are elimi		enlated						
Noise hazards are eliminated or controlled in th		John Co.						
Engulfment hazards are eliminated.	io apaoa.							
Ventilation (if required) is in place and providing	a air from a clean so	urce (no exhausts, no cont	aminants, etc.)					
Communication means with the entrants and re								
Tripod (if required) is in place and entrants are								
Pedestrian and vehicle barriers/signs (if require	ed) are in place.							
Confined Space Entry Permit is maintained at t								
Other hazards (if applicable) are eliminated/cor	ntrolled. List hazards	introduced during entry (he	ot work, chemicals, painting, cleaning), electrical,					
wildlife, and/or combustible dust/fumes, etc:								
Hazard: Elimin	ation/Control Means	c						
Hazard: Elimin	ation/Control Means	ontrol Means:						
Hazard: Elimin	ation/Control Means							
MERGENCY RESCUE PLANS/PROCEDURES								
Complex/unique rescue - Attach written Rescue Plan to	permit							
Rescue plan/methods:								
Method(s) for contacting Emergency Rescue: On	-Site/In-Place Rescu	e Radio Cel	I Phone (228-688-3636) SSC Land Line (911)					
Contractor provided emergency/rescue service coordina	ated with SSC Fire D	epartment:	Date:					
			Date:					

AUTHORIZED ATTENDANT: I	reviewed the	e confined spa	ace entry cor		ents and understand m	y Attendant	roles & re	sponsibilities		
Printed Name	Signature		Training Expiration	Printed Name		Signature			Training Expiration	
AUTHORIZED ENTRANT(S): 1 (attach additional sheets as require	reviewed the d)	e confined spa	ace entry per	mit conditions/re	quirements and unders	tand my Ent	trant roles	& responsibil	lities.	
Printed Name	Signature		Training	g Printed Name		Signature			Training	
6. AUTHORIZED ENTRANT TR	ACKING (H	inch additional o	hosts as roavi							
		Time In	Time Out	Authorized Entrant		rant		Time In	Time Out	
7. ATMOSPHERIC TESTING AN	D MONITOR	ING EQUIPMI	INT							
Area Monitor/Meter	Area Monitor/Meter Model Nu		Model Numi	ber	Serial N	Serial No/ECN		Cali	ibration Due I	Date
Personal Monitors										
B. ATMOSPHERIC TESTING AN										
Continuous monitoring shall	be recorded Initial Read		y 2 hours. ( kt Reading	Attach additional sh Next Reading		Next Re	ading	Next Read	ng Nex	t Reading
Hazard (acceptable level)	Time:	-	10:	Time:	Time:	Time:	-	Time:	Tim	-
Oxygen (19.5% - 23.5%)										
Flammable (<10% LEL)										
Carbon Monoxide (<35 ppm)										
Hydrogen Sulfide (H2S, 0 ppm)										
Other Hazard:						-				
Other Hazard: Testers Initials				-		-	_			
<ul> <li>PERMIT CANCELLATION/TEL</li> <li>I personally verified all equip</li> </ul>			nersons exit	ed the confined	space and conducted	a debrief	L certify ti	nie nermit ie o	anceled/tem	ninated
· paratinany vormos all equip	and the second s	anger anger anger	CAR CAR	the controlog		- available i	. Serving a		and a second	and the second se
						_				
Entry Supervisor Prin				Entry Supervise				Date/Time		
10. POST ENTRY AUDIT & COR The Post Entry audit of this e						mended cor	rective a	ctions/areas f	for improvem	ient.
1. Discrepancy:				Recommend						
2. Discrepancy:				Recommend	ation:					
3. Discrepancy:				Recommend	ation:					
4. Discrepancy:				Recommend	ation:					