

SAMPLE

Permit to Work Activity

*Practice Filling Out Work Permits from
Real Job Scenarios*

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About This Activity

Introduction

A Permit to Work (PTW) is a formal authorization system used to control high-risk jobs and ensure that safety requirements are in place before work begins. It defines the work, identifies the people responsible, and records the precautions needed to make the task safe.

Your task is to:

1. Read each job scenario provided.
2. Fill out the relevant permit form using the scenario details.
3. Ensure all required fields (e.g., work description, roles, precautions) are completed.
4. Review your completed permit against the Answer Key at the end of this document.

This will help you strengthen your ability to:

1. Recognize when and why a permit is required.
2. Translate real job details into the correct PTW form entries.
3. Build practical confidence in using the PTW system to control high-risk work.

Why This Matters

Permits to Work are essential for preventing accidents during high-risk activities. By practicing how to complete permits from real scenarios, you will gain the skills to apply PTW requirements correctly, ensure that safety conditions are satisfied, and make sure no work begins without proper authorization.

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Completing the activity

How to Complete This Activity

1. Review the job scenario provided.

Read carefully to understand the type of work, where it takes place, and how it will be carried out.

2. Select the relevant PTWs and certificates.

Refer to the appendix at the end of this document. From the available permit and certificate templates, identify which ones are required for the scenario.

3. Fill in the selected PTWs/certificates.

Enter the main job details, such as the job description, location, and duration. Identify the hazards mentioned in the scenario and check the relevant boxes on the form.

Note the precautions and control measures that must be in place.

Include the roles of the people involved by filling in the correct names and signatures where required.

4. Work through the whole permit process.

Make sure every required section is completed, including issue, receipt, and any additional certificates if the work requires them.

5. When finished, compare your answers with the Answer Key at the end of this document.

Use the key to check whether you selected the correct permits and certificates, identified the right hazards, and included the appropriate precautions and authorizations.

1. Tank Cleaning

On 15 September 2025, XYZ Co. Ltd. process department arranged for sludge removal inside Storage Tank T-101. The tank is a fixed-roof steel vessel with a single top manway, which makes it a confined space because of the restricted entry/exit, poor natural ventilation, and risk of harmful atmosphere.

The work was coordinated with Eng. Tariq Mahmoud, Maintenance Foreman, and reviewed by Eng. Huda Nasser, Maintenance Supervisor.

Before anyone entered, the tank was isolated from its pipelines, and lines were blinded to prevent any product from flowing in. That morning, Mr. Ziad Kamel, Gas Tester, checked the atmosphere inside the tank with a calibrated monitor. The readings showed: oxygen 20.9%, LEL 0%, H₂S 0 ppm, and CO 0 ppm. Ventilation fans were installed to supply fresh air continuously during the work.

The cleaning team was led by Mr. Sameer Al-Fahad, Contractor Supervisor from CleanTank LLC, with his crew wearing coveralls, respirators, helmets, gloves, safety shoes, and full-body harnesses with lifelines. A continuous gas detector was worn by one entrant.

Close to the manway, Mr. Kareem Nassar, Production Coordinator, stayed nearby throughout the job, while Ms. Rawan Jaber, Emergency Response Team Lead, remained ready with a tripod, winch, and breathing apparatus for rescue. Warning signs and barriers were placed around the tank.

Work began at 07:00am. By 2:00pm it became clear that the sludge was too heavy to finish in one shift. The job was stopped, the tank secured, and the permit was formally closed for the day.

On the next morning, 16 September 2025, conditions were checked again before restarting. A fresh gas test by Mr. Ziad Kamel showed safe levels: oxygen 20.9%, LEL 0%, H₂S 0 ppm, and CO 0 ppm. Ventilation continued and all controls remained in place. The team re-entered under a new certificate and completed the cleaning by 1:00pm. After final checks confirmed the tank was safe, the work was declared finished and the area handed back for normal operation.

Appendix: permit and certificate templates

Company Name: [Insert Company Name]		HOT WORK PERMIT	
Permit Number:			
Relevant Permit/Certificate:			
Job Location:			
Job Description:			
Hazards (tick as appropriate):			
<input type="checkbox"/> Fire	<input type="checkbox"/> Electricity	<input type="checkbox"/> Chemicals	<input type="checkbox"/> Work at Height
<input type="checkbox"/> Confined Space	<input type="checkbox"/> Hot Work	<input type="checkbox"/> Excavation	
Control Measures / Precautions Required (tick as appropriate):			
<input type="checkbox"/> Fire extinguishers	<input type="checkbox"/> Fire blankets	<input type="checkbox"/> Gas Testing	
<input type="checkbox"/> Fire Watcher	<input type="checkbox"/> Emergency Plan	<input type="checkbox"/> Combustible materials cleared	
PPE Required (tick as appropriate):			
<input type="checkbox"/> Helmet	<input type="checkbox"/> Safety Shoes	<input type="checkbox"/> Gloves	<input type="checkbox"/> Coverall
<input type="checkbox"/> Face Shield/ Goggles	<input type="checkbox"/> Harness	<input type="checkbox"/> Respirator	<input type="checkbox"/> Ear protection
Authorization:		Receipt:	
	Permit Originator By signing, I confirm hazards & precautions identified.	Approval Authority By signing, I authorize the work to proceed.	Permit Watcher By signing, I confirm site monitoring & compliance.
Signature:			
Date:			
Close:			
Permit Watcher By signing, I confirm that work completed, area safe, operations may resume		Signature:	Date:
Cancellation:			
	Permit Originator Work stopped, area made safe, permit void	Approval Authority Work stopped, area made safe, permit void	
Signature:			
Date:			
Extension:			
Permit extended until, conditions re-checked			
	Permit Originator	Permit Watcher	Approval Authority
Signature:			
Date:			
One copy of this permit should be kept in the Permit Book with the originator; one should remain with the Permit Watcher at the worksite and a third should be placed on the Permit Board for visibility.			

Appendix: permit and certificate templates

Company Name: [Insert Company Name]		COLD WORK PERMIT	
Permit Number:			
Relevant Permit/Certificate:			
Job Location:			
Job Description:			
Hazards (tick as appropriate):			
<input type="checkbox"/> Fire	<input type="checkbox"/> Electricity	<input type="checkbox"/> Chemicals	<input type="checkbox"/> Work at Height
<input type="checkbox"/> Confined Space	<input type="checkbox"/> Hot Work	<input type="checkbox"/> Excavation	
Control Measures / Precautions Required (tick as appropriate):			
<input type="checkbox"/> Isolation	<input type="checkbox"/> Barricading	<input type="checkbox"/> Gas Testing	
<input type="checkbox"/> Fire Watcher	<input type="checkbox"/> Emergency Plan	<input type="checkbox"/> Toolbox Talk	
PPE Required (tick as appropriate):			
<input type="checkbox"/> Helmet	<input type="checkbox"/> Safety Shoes	<input type="checkbox"/> Gloves	<input type="checkbox"/> Coverall
<input type="checkbox"/> Face Shield/ Goggles	<input type="checkbox"/> Harness	<input type="checkbox"/> Respirator	<input type="checkbox"/> Ear protection
Authorization:			Receipt:
	Permit Originator By signing, I confirm hazards & precautions identified.	Approval Authority By signing, I authorize the work to proceed.	Permit Watcher By signing, I confirm site monitoring & compliance.
Signature:			
Date:			
Close:			
Permit Watcher By signing, I confirm that work completed, area safe, operations may resume		Signature:	Date:
Cancellation:			
	Permit Originator Work stopped, area made safe, permit void	Approval Authority Work stopped, area made safe, permit void	
Signature:			
Date:			
Extension:			
Permit extended until, conditions re-checked			
	Permit Originator	Permit Watcher	Approval Authority
Signature:			
Date:			
One copy of this permit should be kept in the Permit Book with the originator; one should remain with the Permit Watcher at the worksite and a third should be placed on the Permit Board for visibility.			

Appendix: permit and certificate templates

Company Name: [Insert Company Name]		CONFINED SPACE ENTRY CERTIFICATE					
Certificate No.:							
Date:							
Time Issued:							
Valid Until:							
Work Details:							
Location / Area:							
Confined Space Description:							
Work to be Performed:							
Related PTW No.:							
Hazards (tick as appropriate):							
<input type="checkbox"/> Oxygen deficiency		<input type="checkbox"/> Flammable atmosphere		<input type="checkbox"/> Toxic gases/vapors			
<input type="checkbox"/> Restricted access/egress		<input type="checkbox"/> Engulfment (solids/liquids)		<input type="checkbox"/> Other: _____			
Control Measures / Precautions Required (tick as appropriate):							
<input type="checkbox"/> Isolation of energy sources		<input type="checkbox"/> Blanking/blinding of lines		<input type="checkbox"/> Ventilation / Purging arranged			
<input type="checkbox"/> Continuous gas monitoring in place		<input type="checkbox"/> Communication system established		<input type="checkbox"/> Emergency rescue plan in place			
<input type="checkbox"/> Standby person assigned		<input type="checkbox"/> PPE specified: _____		<input type="checkbox"/> Lighting intrinsically safe			
<input type="checkbox"/> Firefighting equipment available		<input type="checkbox"/> Other: _____					
Gas Test Results:							
Date/Time	Oxygen (%)	LEL (%)	H ₂ S (ppm)	CO (ppm)	Other: _____	Tested By	Signature
Personnel Authorized to Enter:							
Name	Employer	Job Title	Signature	Time In	Time Out		
Authorization:							
Permit Issuer / Responsible Person				Permit Receiver			
Name:							
Signature:							
Date:							
Closure:							
I confirm that the confined space has been exited, checked, and left in a safe condition.							
Permit Issuer / Responsible Person				Permit Receiver			
Name:							
Signature:							
Date:							
Copies Distribution: One copy shall be retained with the Permit Office/Originator, one copy kept at the worksite with the Performing Authority, and one copy retained for visibility/monitoring.							

Appendix: permit and certificate templates

Company Name: [Insert Company Name]		EXCAVATION CERTIFICATE					
Certificate No.:				Date:			
Time Issued:				Valid Until:			
Work Details:							
Location / Area:							
Type of Excavation:				<input type="checkbox"/> Trench	<input type="checkbox"/> Pit	Shaft <input type="checkbox"/>	Other: _____
Depth: _____ m				Length/Width: _____ m			
Work to be Performed:							
Related PTW No.:							
Hazards (tick as appropriate):							
<input type="checkbox"/> Buried electrical cables		<input type="checkbox"/> Gas / oil pipelines		<input type="checkbox"/> Water / sewage pipelines			
<input type="checkbox"/> Soil collapse / cave-in		<input type="checkbox"/> Falling objects		<input type="checkbox"/> Water ingress / flooding			
<input type="checkbox"/> Toxic or flammable gases		<input type="checkbox"/> Traffic movement		<input type="checkbox"/> Other: _____			
Control Measures / Precautions Required (tick as appropriate):							
<input type="checkbox"/> Utility drawings reviewed and services located/isolated		<input type="checkbox"/> Permit from local authority obtained (if required)		<input type="checkbox"/> Shoring / shielding / trench box installed			
<input type="checkbox"/> Benching or battering of sides		<input type="checkbox"/> Barricading and warning signs in place		<input type="checkbox"/> Access/egress ladders provided			
<input type="checkbox"/> Atmosphere tested and monitored (if required)		<input type="checkbox"/> Pumping/dewatering arrangements available		<input type="checkbox"/> Spoil piles kept at least 1 m from edge			
<input type="checkbox"/> PPE specified: _____		<input type="checkbox"/> Standby/flagman in place for traffic control		<input type="checkbox"/> Emergency plan in place			
<input type="checkbox"/> Other: _____							
Gas Test Results:							
Date/Time	Oxygen (%)	LEL (%)	H ₂ S (ppm)	CO (ppm)	Other: _____	Tested By	Signature
Authorization:							
Permit Issuer / Responsible Person				Permit Receiver			
Name:							
Signature:							
Date:							
Closure:							
I confirm that the excavation has been safely backfilled/secured, checked, and left in a safe condition.							
Permit Issuer / Responsible Person				Permit Receiver			
Name:							
Signature:							
Date:							
Copies Distribution: One copy shall be retained with the Permit Office/Originator, one copy kept at the worksite with the Performing Authority, and one copy retained for visibility/monitoring.							

Appendix: permit and certificate templates

Company Name: [Insert Company Name]		HIGH VOLTAGE ISOLATION CERTIFICATE		
Certificate No.:		Date:		
Time Issued:		Valid Until:		
Work Details:				
Location / Substation / Area:				
Equipment / Circuit Description:				
Voltage Level: _____ kV				
Work to be Performed:				
Related PTW No.:				
Isolation Details:				
Isolation Point	Type of Isolation (Switch/CB/Disconnector / Fuse/Other)	Method (Locked / Tagged / Removed)	Confirmed By	Signature
Control Measures / Precautions Required (tick as appropriate):				
<input type="checkbox"/> Switchgear racked out/ withdrawn		<input type="checkbox"/> Circuit breakers opened and locked		<input type="checkbox"/> Disconnectors opened and locked
<input type="checkbox"/> Fuses withdrawn		<input type="checkbox"/> Earth switches applied / portable earths installed		<input type="checkbox"/> Danger tags applied
<input type="checkbox"/> Key exchange system in place		<input type="checkbox"/> Work area barricaded and warning signs posted		<input type="checkbox"/> Test for dead carried out and confirmed
<input type="checkbox"/> PPE specified: _____		<input type="checkbox"/> Other: _____		
Authorization:				
I confirm that the above equipment has been isolated, earthed where required, and is safe for work under the associated PTW.				
	Permit Issuer / Responsible Person		Permit Receiver	
Name:				
Signature:				
Date:				
Restoration:				
I confirm that the work has been completed, all personnel withdrawn, all tools/equipment removed, and it is safe to restore supply.				
	Permit Issuer / Responsible Person		Permit Receiver	
Name:				
Signature:				
Date:				
Copies Distribution: One copy shall be retained with the Permit Office/Originator, one copy kept at the worksite with the Performing Authority, and one copy retained for visibility/monitoring.				

Answer key: Tank Cleaning

XYZ Co. Ltd.		COLD WORK PERMIT	
Permit Number:		CWP-2025-022	
Relevant Permit/Certificate:		Confined Space Entry (CSE-2025-005)	
Job Location:		Storage Tank T-101	
Job Description:		Sludge removal and cleaning inside tank	
Hazards (tick as appropriate):			
<input type="checkbox"/> Fire	<input type="checkbox"/> Electricity	<input checked="" type="checkbox"/> Chemicals	<input type="checkbox"/> Work at Height
<input checked="" type="checkbox"/> Confined Space	<input type="checkbox"/> Hot Work	<input type="checkbox"/> Excavation	
Control Measures / Precautions Required (tick as appropriate):			
<input checked="" type="checkbox"/> Isolation	<input checked="" type="checkbox"/> Barricading	<input checked="" type="checkbox"/> Gas Testing	
<input type="checkbox"/> Fire Watcher	<input checked="" type="checkbox"/> Emergency Plan	<input type="checkbox"/> Toolbox Talk	
PPE Required (tick as appropriate):			
<input checked="" type="checkbox"/> Helmet	<input checked="" type="checkbox"/> Safety Shoes	<input checked="" type="checkbox"/> Gloves	<input checked="" type="checkbox"/> Coverall
<input type="checkbox"/> Face Shield/ Goggles	<input checked="" type="checkbox"/> Harness	<input checked="" type="checkbox"/> Respirator	<input type="checkbox"/> Ear protection
Authorization:			Receipt:
	Permit Originator By signing, I confirm hazards & precautions identified.	Approval Authority By signing, I authorize the work to proceed.	Permit Watcher By signing, I confirm site monitoring & compliance.
Signature:	Tariq Mahmoud	Huda Nasser	Kareem Nassar
Date:	15 September 2025	15 September 2025	15 September 2025
Close:			
Permit Watcher By signing, I confirm that work completed, area safe, operations may resume		Signature: Kareem Nassar	Date: 16 September 2025
Cancellation:			
	Permit Originator Work stopped, area made safe, permit void	Approval Authority Work stopped, area made safe, permit void	
Signature:	Tariq Mahmoud	Huda Nasser	
Date:	16 September 2025	16 September 2025	
Extension:			
Permit extended until 16 September 2025, conditions re-checked			
	Permit Originator	Permit Watcher	Approval Authority
Signature:	Tariq Mahmoud	Kareem Nassar	Huda Nasser
Date:	16 September 2025	16 September 2025	16 September 2025
One copy of this permit should be kept in the Permit Book with the originator; one should remain with the Permit Watcher at the worksite and a third should be placed on the Permit Board for visibility.			

Answer key: Tank Cleaning

XYZ Co. Ltd.		CONFINED SPACE ENTRY CERTIFICATE					
Certificate No.:		CSE-2025-005					
Date:		15 September 2025					
Time Issued:		07:00am					
Valid Until:		02:00pm					
Work Details:							
Location / Area:		Storage Tank T-101					
Confined Space Description:		Fixed-roof tank with manway entry					
Work to be Performed:		Internal cleaning and sludge removal					
Related PTW No.:		Cold Work Permit (CWP-2025-022)					
Hazards (tick as appropriate):							
<input checked="" type="checkbox"/> Oxygen deficiency		<input type="checkbox"/> Flammable atmosphere		<input checked="" type="checkbox"/> Toxic gases/vapors			
<input checked="" type="checkbox"/> Restricted access/egress		<input checked="" type="checkbox"/> Engulfment (solids/liquids)		<input type="checkbox"/> Other: _____			
Control Measures / Precautions Required (tick as appropriate):							
<input type="checkbox"/> Isolation of energy sources		<input checked="" type="checkbox"/> Blanking/blinding of lines		<input checked="" type="checkbox"/> Ventilation / Purging arranged			
<input checked="" type="checkbox"/> Continuous gas monitoring in place		<input type="checkbox"/> Communication system established		<input checked="" type="checkbox"/> Emergency rescue plan in place			
<input checked="" type="checkbox"/> Standby person assigned		<input checked="" type="checkbox"/> PPE specified: _____		<input type="checkbox"/> Lighting intrinsically safe			
<input type="checkbox"/> Firefighting equipment available		<input type="checkbox"/> Other: _____					
Gas Test Results:							
Date/Time	Oxygen (%)	LEL (%)	H ₂ S (ppm)	CO (ppm)	Other: _____	Tested By	Signature
15/9/2025	20.9	0	0	0		Ziad Kamel	Ziad Kamel
Personnel Authorized to Enter:							
Name	Employer	Job Title	Signature	Time In	Time Out		
Sameer Al-Fahad	CleanTank	Supervisor	Sameer Al-Fahad	7:00am	2:00pm		
Authorization:							
Permit Issuer / Responsible Person				Permit Receiver			
Name:	Tariq Mahmoud			Kareem Nassar			
Signature:	Tariq Mahmoud			Kareem Nassar			
Date:	15 September 2025			15 September 2025			
Closure:							
I confirm that the confined space has been exited, checked, and left in a safe condition.							
Permit Issuer / Responsible Person				Permit Receiver			
Name:	Tariq Mahmoud			Kareem Nassar			
Signature:	Tariq Mahmoud			Kareem Nassar			
Date:	15 September 2025			15 September 2025			
Copies Distribution: One copy shall be retained with the Permit Office/Originator, one copy kept at the worksite with the Performing Authority, and one copy retained for visibility/monitoring.							

Answer key: Tank Cleaning

XYZ Co. Ltd.		CONFINED SPACE ENTRY CERTIFICATE					
Certificate No.:		CSE-2025-005					
Date:		16 September 2025					
Time Issued:		07:00am					
Valid Until:		02:00pm					
Work Details:							
Location / Area:		Storage Tank T-101					
Confined Space Description:		Fixed-roof tank with manway entry					
Work to be Performed:		Continuation of sludge removal and tank cleaning					
Related PTW No.:		Cold Work Permit (CWP-2025-022)					
Hazards (tick as appropriate):							
<input checked="" type="checkbox"/> Oxygen deficiency		<input type="checkbox"/> Flammable atmosphere		<input checked="" type="checkbox"/> Toxic gases/vapors			
<input checked="" type="checkbox"/> Restricted access/egress		<input checked="" type="checkbox"/> Engulfment (solids/liquids)		<input type="checkbox"/> Other: _____			
Control Measures / Precautions Required (tick as appropriate):							
<input type="checkbox"/> Isolation of energy sources		<input checked="" type="checkbox"/> Blanking/blinding of lines		<input checked="" type="checkbox"/> Ventilation / Purging arranged			
<input checked="" type="checkbox"/> Continuous gas monitoring in place		<input type="checkbox"/> Communication system established		<input checked="" type="checkbox"/> Emergency rescue plan in place			
<input checked="" type="checkbox"/> Standby person assigned		<input checked="" type="checkbox"/> PPE specified: _____		<input type="checkbox"/> Lighting intrinsically safe			
<input type="checkbox"/> Firefighting equipment available		<input type="checkbox"/> Other: _____					
Gas Test Results:							
Date/Time	Oxygen (%)	LEL (%)	H ₂ S (ppm)	CO (ppm)	Other: _____	Tested By	Signature
16/9/2025	20.9	0	0	0		Ziad Kamel	Ziad Kamel
Personnel Authorized to Enter:							
Name	Employer	Job Title	Signature	Time In	Time Out		
Sameer Al-Fahad	CleanTank	Supervisor	Sameer Al-Fahad	7:00am	1:00pm		
Authorization:							
Permit Issuer / Responsible Person				Permit Receiver			
Name:	Tariq Mahmoud			Kareem Nassar			
Signature:	Tariq Mahmoud			Kareem Nassar			
Date:	16 September 2025			16 September 2025			
Closure:							
I confirm that the confined space has been exited, checked, and left in a safe condition.							
Permit Issuer / Responsible Person				Permit Receiver			
Name:	Tariq Mahmoud			Kareem Nassar			
Signature:	Tariq Mahmoud			Kareem Nassar			
Date:	16 September 2025			16 September 2025			
Copies Distribution: One copy shall be retained with the Permit Office/Originator, one copy kept at the worksite with the Performing Authority, and one copy retained for visibility/monitoring.							

About the Author



Khalid Ahmed is a Chartered Member of IOSH (CMIOSH) and a Member of the Chartered Institution of Water and Environmental Management (MCIWEM), with over 10 years of professional experience in Health, Safety, and Environment (HSE) practice and 7+ years in HSE training. Holding multiple industry-recognized qualifications—including M.Sc. in Safety, B.Sc. (Hons.) in Chemical Engineering, NEBOSH Environmental Diploma, NEBOSH International General Certificate, Level 3 Award in Education and Training, and ICDL—

Khalid has delivered safety training to diverse industries in the Middle East. His mission is to make safety knowledge clear, practical, and accessible for all workers and supervisors.