Hot Work Permit

Control welding, cutting, and grinding with fire watch and precautions. Printable checklist. * = required.

Date *

Start time *

End time *

Location of hot work *

Hot work type *

- ○ Welding
- ○ Soldering / brazing
- ○ Other
- ○ Cutting / grinding
- ○ Open flame

Person doing hot work *

Fire watch name *

Precautions completed *

- ☐ Area cleared of combustibles
- ☐ Sparks contained / screens
- ☐ PPE suitable for task
- ☐ Fire extinguisher on hand
- ☐ Smoke / heat detection considered

Fire watch duration after work *

- ○ 30 minutes
- ○ As specified in notes
- ○ 60 minutes

Notes / special conditions

Photo of work area (optional)

Attach or note photo reference

Authoriser signature *

Name: _____ Date: _____

Hot work operator signature *

Name: _____ Date: _____