WASHINGTON ADVENTIST UNIVERSITY DEPARTMENT OF PUBLIC SAFETY UNIVERSITY FIRE PLAN	APPLICABILITY: ALL UNIVERSITY BUILDINGS		
	Issue Date:	**Permit No.:**	**Work Order:**
	TITLE: HOT WORK PERMIT		

This form is to be filled out in its entirety by the responsible person actually performing the "HOT WORK" and then brought to Washington Adventist University Department of Public Safety Fire Safety Division for approval prior to beginning the project.

Company:	Date:	Start:	End:
Building**:**	Responsible Person:		
Work to be performed:			
Room Number, Area or Equipment:			
Is it possible to perform this work in the shop? **Yes or No**			
The following items - completed flame or spark-producing equipment to be used - have been inspected and found in good repair. **Yes or No**			
Sprinkler systems, where provided, are in commission and will not be taken out of service while work is being done. **Yes or No**			
There are no combustible fibers, dust, vapor, gases or liquids in the area. Tanks and equipment previously containing such materials have been purged. The absence of vapors has been verified by a combustible gas detection instrument (applicable areas). If there is a possibility of a leak developing in nearby piping equipment or tanks, this area is to be continuously monitored. Call WAU-DPS at ext**: 4019** if assistance is needed to test the area. **Yes or No**			
Fire alarms will not be taken out of service while is being performed. If alarm system must be inactivate during work, then DFS or DPS will be contacted prior to taking alarm out of service so that a suitable "**Fire Watch**" can be coordinated with Campus Security. Under no circumstance will fire alarms be taken out of service without contacting DPS. **Yes or No**			
Fire Watch will be provided during and continuously for 30 minutes after work, including during any work breaks. It will be supplied with a suitable extinguisher, and worker has been trained in the use of the equipment and sounding alarm. Fire watch may be required for adjoining areas, and hot work area will be inspected 30 minutes after job completed. **Yes or No**			
Floor swept clean of combustibles. **Yes or No**			
Combustible floor wet down. **Yes or No**			
All wall and floor openings covered. **Yes or No**			
Area in question was inspected by a Safety Officer: **Yes or No** Who:			
DFS and DPS were informed: **Yes or No**	Who:		
Fire department was informed:	Time:	Operator/Reference No.:	
WAU-Safety Officer Approval and Signature:		Date:	Time:

***By signing this form, I state that the information above is correct to the best of my knowledge:**

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Signature Date

For Security Only:

Was Nixle announcement sent out? Yes or No

By whom? When?