

**Lab Work Permit**Utilities and Engineering Services

The intent of this form is to document all access into lab spaces by non-research/ non-EH&S staff and for consultants of the University performing their duties under the direction of Facilities and/or Maintenances. Submittal of this form signifies the intent to make changes to the lab space’s air, water, electrical, or critical systems. The Researcher and Department reserve the right to request that any activity listed below not be performed with a written explanation included below in the Special Notes sections. Any tasks listed on this form and approved in the Department or Research sections of this form are expected to be performed as described. If any changes need to be made to the work instructions or build plans during the Requestor’s time in the lab space, the Department, Researcher, and Facilities/Maintenance must be contacted prior to any work taking place. It is recommended that this form be submitted a month before the proposed start date. Any safety issues or accidents that may arise during the requestor’s tenure in the lab space are required to be reported to the Department, Researcher, and Facilities/Maintenance within twenty-four hours of it having occurred. Failure to comply with appropriate lab safety and University policy may result in penalties. Approval of this form by the indicates approval of the activities and rationale for entering as listed below.

Requestor: Click or tap here to enter text. Date: Click or tap to enter a date.

Permit #: Click or tap here to enter text. Department: Click or tap here to enter text.

Building: Click or tap here to enter text.

Lab(s) Covered under this form: Click or tap here to enter text.

**Requestor Section**

1. Reason for Entering the Lab: Click or tap here to enter text.
2. Description of Work to be Completed: Click or tap here to enter text.
3. Dates Requested: Click or tap here to enter text.
4. Estimated Start Time: Choose an item.

Estimated Completion Time: Choose an item.

1. Special Notes: Click or tap here to enter text.

**Researcher Section**

1. Proposed New Date and Time (if Applicable): Click or tap here to enter text.
2. Special Precautions/PPE Required: Click or tap here to enter text.
3. Specific Hazards: Click or tap here to enter text.
4. Equipment protection required: Click or tap here to enter text.
5. Special Notes: Click or tap here to enter text.

**Department Section**

1. Special Notes: Click or tap here to enter text.

**General Notes**

1. Permit scope is limited to the activities described on the permit. More information may be attached to the document.
2. CONTRACTOR/FACILITIES will not complete work without a signed, completed Work Permit.
3. CONTRACTOR/FACILITIES must contact the DEPARTMENT if the schedule needs to be changed.
4. CONTRACTOR/FACILITIES must be in contact with the DEPARTMENT prior to starting work on permitted activities.
5. RESEARCHER must include all toxic, flammable, oxidative, reactive, and/or potentially harmful chemicals/chemical containers that the CONTRACTOR/FACILITIES representative may come in contact with.
6. RESEARCHER is responsible for describing the equipment protection necessary. To prevent damage or manipulation of any piece of equipment in the lab space, any caps, covers, shut-down procedures, lists of equipment that cannot be turned off or unplugged, etc. that must be used should be listed above.
7. DEPARTMENT will assist in placing equipment protections (e.g. covers).

**Signatures**

A typed acknowledgement is a sufficient signature for the purposes of this document. It does not need to be printed and signed.

Researcher Signature Date

Click or tap here to enter text. Click or tap to enter a date.

Department Signature Date

Click or tap here to enter text. Click or tap to enter a date.

Facilities Signature Date

Click or tap here to enter text. Click or tap to enter a date.