

Kean University-Fire Safety Office CUTTING AND WELDING PERMIT PORTABLE GAS OR ARC EQUIPMENT

| | ued by: Lou Magliaro (Pri | ior approval required) | Permit Number: | | | |
|--|---|---------------------------|--------------------------|------------------|------|--|
| Date | e Issued: | | Date Expires: | | | |
| | | | | | | |
| I. Requestor Completes Section A or B and C, D & E and must read reverse side of document: A. External Contractor: NJ STATE fee based permit required contact Kean's Fire Official | | | | | | |
| Α. | · | | | | | |
| 1 | Project Coordinator's Na | ime: | 1 | | | |
| 2 | Telephone Extension: | | 3. Project Name: | | | |
| 4 | Contractor's Complete Company Name: | | | | | |
| | Telephone Number: | | 6. Pager Number: | | | |
| 5 | • | | - | | | |
| 7 | Cell Phone Number: | | 8. Fax Number: | | | |
| В | Internal Requestor: Annual permit provided - contact Kean's Fire Safety Office for approval | | | | | |
| 1 | Kean University Project Coordinator's Name: | | | | | |
| 2 | Project Name: | | | | | |
| 3 | | | 4. Cell Phone Number: | | | |
| | Telephone Extension: Weldor (s) Info.: | | 14. Cell Filone Number. | | | |
| | | | | | | |
| 1 | Name of Person Performing Welding: | | | | | |
| 2 | Name of Person Performing Welding: | | | | | |
| 3 | Name of Person Performing Welding: | | | | | |
| 4 | Name of Person Performing Welding: | | | | | |
| D | Worksite Information: | | | | | |
| 1 | Building Name: | | 2. Floor Number: | 3. Room Number: | | |
| 4 | Work to be done: | Circle: Welding Cutti | ng Soldering Oth | er | | |
| 5 | Description of work being done: | | | | | |
| | Becompaint of work being done. | | | | | |
| THIS FORM SHALL BE VERT ON JOB SITE & BARRIER & TO SEE OF THE SECOND STATES | | | | | | |
| THIS FORM SHALL BE KEPT ON JOB SITE & Returned to Kean Fire Safety Office Upon Completion START UP TIME AND DATES | | | | | | |
| 1 | Start-up Date: | | 2. Start-up Time: | | | |
| | • | | | | | |
| 3 | End Date: 4. End Time: SIGN AREA BELOW FOR FIRE WATCH AND MONITORING PERIODS | | | | | |
| | | | | | | |
| 1 | FIRE WATCH STARTED | | FIRE WATCH COMPLETED | | | |
| 3 1ST MONITOR PERIOD 2ND MONITOR PERIOD | | | | | | |
| have | read and understand THE | REVERSE SIDE of this perm | it and agree to abide by | the requirements | | |
| of this document and the Fire Safety Office Cutting and Welding Procedures. I further | | | | | | |
| nderstand that all Cutting and Welding Operations are subject to inspection and possible corrective action. | | | | | | |
| E | | | | | | |
| equestor's Name: | | | | | | |
| Print Name | | | Signature | | Date | |

Kean University-Fire Safety Office CUTTING AND WELDING PERMIT-Side B

Minimum Requirements: (1) Requestor must obtain signed prior approval from the Fire Official. Call 908-737-4813 and follow instructions on the voice mail. if the Fire Official does not answer the phone. Requestor must speak directly with Fire Official before any 'hot work" can begin at Kean University. If needed, requestor can call Campus Police at 908-737-4800 and leave their contact number and wait for Fire Official to return call.(2) There must be a minimum of one 2-A: 20 BC extinguisher onsite and one portable fire extinguisher with a minimum 2-A: 10 BC rating attached to all portable welding carts. Protection of combustibles-including floor, ceiling and wall openings within 35ft of welding/cutting must be provided with noncombustible shields/covers (3) All welding and cutting operations must cease by 3:00 PM (4) All welding and cutting work to be performed before 7:00 AM or after 3:00 PM, or on weekends must be so stated and pre-arranged with The Fire Official. (5) THE FIRE **SAFETY OFFICE MUST BE NOTIFIED PRIOR TO BEGINNING (6) A Fire Watch must** be provided at all locations due to the potential for fire. A Fire Watch requires that a person be trained in the use of fire extinguishers, is familiar with the building, and the procedures for sounding the fire alarm. The person conducting the Fire Watch must: (a) Watch for fires; (b) Notify the building occupants in case of fire by activating the fire alarm; (c) Notify Campus Police at 908-737-4800- on Campus use extension 74800 -if needed call 911 (d) Attempt to extinguish the fire within the capacity of the equipment available without endangering his/her life; and (e) Upon Completion inspect the work area and all adjacent areas to which sparks and heat might have spread including floors above and below and on opposite sides of walls for at least (1) one hour after the work was completed. (7)This Permit must be posted at the jobsite signed and returned to the fire safety office upon completion.

<u>NOTE:</u> Welding and Cutting is prohibited in locations where flammable liquids/vapors/lint/dust/or loose combustible stock is present where hot sparks/metal from welding/cutting operations are capable of causing ignition or explosion of such materials.

Additional Requirements: Campus Police must be notified at the completion of the (1) one hour fire watch. Welder will indicate in person to campus police, locations where cutting and welding was performed. Campus Police will then monitor location for two (2) additional hours after requester has completed the one hour continuous fire watch.

Safeguards in Place: check mark all requirements for completion

- Flammable and combustibles removed from area for 35ft distance
- Floors swept clean of combustible materials
- Fire extinguishers on site as listed above
- Area Barricaded to prevent unauthorized personnel from entering
- Local exhaust system installed-if needed
- Combustible floors wetted down
- Non-combustible drop cloth installed
- Other____

| Project Manger sign and print name_ | |
|-------------------------------------|--|
| Fire Official approval | |