

LOCKOUT/TAGOUT SITE SPECIFIC PROCEDURE

Equipment: _____ Location: _____

Energy Source(s) (check those that apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Electricity | <input type="checkbox"/> Kinetic parts (moving parts) | <input type="checkbox"/> Thermal component |
| <input type="checkbox"/> Compressor air | <input type="checkbox"/> Chemicals | <input type="checkbox"/> Hydraulic component |
| <input type="checkbox"/> Water | <input type="checkbox"/> Pneumatic components | <input type="checkbox"/> Potential source (stored) |
| <input type="checkbox"/> Natural gas | <input type="checkbox"/> Control power | <input type="checkbox"/> Other compressed gas |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

Lockout and/or Tagout Device(s) (check those that apply):

- | | | |
|--|--|--|
| <input type="checkbox"/> Lock Box | <input type="checkbox"/> Power Cord Plug Box/Cover | <input type="checkbox"/> Adjustable Cable Device |
| <input type="checkbox"/> Locks w/keys | <input type="checkbox"/> Universal Valve Device | <input type="checkbox"/> Fuse Lockout Device |
| <input type="checkbox"/> Tagout Tags | <input type="checkbox"/> Gate Valve Device | <input type="checkbox"/> Wall Switch Device |
| <input type="checkbox"/> Lockout Hasps | <input type="checkbox"/> Circuit Breaker Device | <input type="checkbox"/> Supervisory Lock w/key |
| <input type="checkbox"/> Other: _____ | | |

Procedures to notify all affected employees and inmates: _____

Description of the shutdown procedures: _____

Procedures for the isolation of equipment from all power sources: _____

Procedure for locking out or tagging out equipment: _____

Procedures for the release of stored energy (where applicable): _____

Procedures to ensure that equipment is isolated from all power sources: _____

Restoring equipment to service:

When the servicing or maintenance is completed and the machine or equipment is ready to return to normal operating condition, the following steps will be taken:

- Check the machine or equipment and the immediate area around the machine or equipment to ensure that nonessential items have been removed and that the machine or equipment components are operationally intact.
- Check the work area to ensure that all employees and inmates have been safely positioned or removed from the area.
- Verify that the controls are in neutral.
- Remove the lockout/tagout devices and reenergize the machine or equipment.
- Notify affected employees that the servicing or maintenance is completed and the machine or equipment is ready for use.

_____ Primary Authorized Employee	_____ Date
_____ Authorized Employee	_____ Date
_____ Authorized Employee	_____ Date
_____ Authorized Employee	_____ Date
_____ Authorized Employee	_____ Date
_____ Authorized Employee	_____ Date
_____ Authorized Employee	_____ Date
_____ Affected Employee	_____ Date
_____ Affected Employee	_____ Date