

Confined Space Assessment / Information Sheet



Instructions: The purpose of this form is to identify the hazards and characteristics of a space to determine if it is a confined space, and if so, if it is a non-permit required space or a permit-required confined space.

| General Information | | | | |
|--|--|--|-----|---|
| Location: | | Type of Space: | | |
| Date of Assessment: | | Assessment Conducted by: | | |
| Confined Space Determination <i>(Simply put, is this a space that normally is not supposed to have a person inside it, but could?)</i> | | | Yes | No |
| Is the space large enough and so configured that an employee can bodily enter and perform assigned work? <i>(Answer YES if an employee is capable of entering the space with their entire body. Consider the smallest employee. Answer NO if the employee cannot fit their entire body in the space.)</i> | | | | |
| Does the space have limited or restricted means of entry or exit? <i>(Answer YES if you must bend or stoop to enter the space, or if you must use a ladder. Answer NO if you can stand fully upright while walking through the opening and walk unobstructed. Walking up/down stairs is not considered a limited or restricted entry.)</i> | | | | |
| Is the space not designed for continuous employee occupancy? <i>(Answer YES if the space is not designed for continuous employee occupancy. Answer NO if the space is designed for an employee to safely work in this space for a prolonged period of time, i.e. service pit in an automotive garage.)</i> | | | | |
| Is this space a confined space? <i>(Answer YES if all 3 items above are marked Yes; proceed to the next section. Answer NO if any of the 3 items above are marked No; this ends this assessment as this space does not qualify as a "confined space".)</i> | | | | |
| Atmospheric Hazards | | | | |
| What is the likelihood that the space has the potential to contain a hazardous atmosphere? <input type="checkbox"/> Never <input type="checkbox"/> Rare <input type="checkbox"/> Unlikely <input type="checkbox"/> Possible <input type="checkbox"/> Likely <input type="checkbox"/> Almost Certain | | What is the consequence if the entrant were exposed to that hazardous atmosphere? <input type="checkbox"/> Insignificant <input type="checkbox"/> Minor <input type="checkbox"/> Moderate <input type="checkbox"/> Major <input type="checkbox"/> Catastrophic | | Using the Risk Assessment Scale below, indicate the level of risk of hazardous atmosphere: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Critical |
| Check which atmospheric hazards are present or potentially present (if any): | | | | |
| <input type="checkbox"/> Oxygen Deficient (O ₂ below 19.5%) <input type="checkbox"/> Explosive Gas/Vapor <input type="checkbox"/> Carbon Monoxide (CO) <input type="checkbox"/> Chlorine (Cl ₂) <input type="checkbox"/> Oxygen Enriched (O ₂ above 23.5%) <input type="checkbox"/> Hydrogen Sulfide (H ₂ S) <input type="checkbox"/> Other (specify): _____ | | | | |
| Engulfment Hazards | | | | |
| What is the likelihood that the space has the potential to engulf or suffocate the entrant? <input type="checkbox"/> Never <input type="checkbox"/> Rare <input type="checkbox"/> Unlikely <input type="checkbox"/> Possible <input type="checkbox"/> Likely <input type="checkbox"/> Almost Certain | | What is the consequence if the entrant were to be engulfed? <input type="checkbox"/> Insignificant <input type="checkbox"/> Minor <input type="checkbox"/> Moderate <input type="checkbox"/> Major <input type="checkbox"/> Catastrophic | | Using the Risk Assessment Scale below, indicate the level of risk of engulfment: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Critical |
| Check which engulfment hazards are present (if any): | | | | |
| <input type="checkbox"/> Sand <input type="checkbox"/> Water <input type="checkbox"/> Soil <input type="checkbox"/> Gravel/Rock <input type="checkbox"/> Sewage <input type="checkbox"/> Oil <input type="checkbox"/> Other (specify): _____ | | | | |
| Entrapment Hazards | | | | |
| What is the likelihood that the space has the potential to trap the entrant? <input type="checkbox"/> Never <input type="checkbox"/> Rare <input type="checkbox"/> Unlikely <input type="checkbox"/> Possible <input type="checkbox"/> Likely <input type="checkbox"/> Almost Certain | | What is the consequence if the entrant were to be entrapped? <input type="checkbox"/> Insignificant <input type="checkbox"/> Minor <input type="checkbox"/> Moderate <input type="checkbox"/> Major <input type="checkbox"/> Catastrophic | | Using the Risk Assessment Scale below, indicate the level of risk of entrapment: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Critical |
| Check which entrapment hazards are present (if any): | | | | |
| <input type="checkbox"/> Converging Walls / Downward Sloping <input type="checkbox"/> Constriction/Taper to a Smaller Cross-Section <input type="checkbox"/> Difficult Exit/Inadequate Access <input type="checkbox"/> Other (specify): _____ | | | | |
| Other Serious Hazards | | | | |
| What is the likelihood that the space has other serious hazards? <input type="checkbox"/> Never <input type="checkbox"/> Rare <input type="checkbox"/> Unlikely <input type="checkbox"/> Possible <input type="checkbox"/> Likely <input type="checkbox"/> Almost Certain | | What is the consequence if the entrant were to be exposed to those hazards? <input type="checkbox"/> Insignificant <input type="checkbox"/> Minor <input type="checkbox"/> Moderate <input type="checkbox"/> Major <input type="checkbox"/> Catastrophic | | Using the Risk Assessment Scale below, indicate the level of risk of entrapment: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Critical |
| Check which other serious hazards are present (if any): | | | | |
| <input type="checkbox"/> Electrical <input type="checkbox"/> Moving Parts <input type="checkbox"/> Slips/Trips/Falls <input type="checkbox"/> Unguarded Machinery <input type="checkbox"/> Chemicals <input type="checkbox"/> Skin/Eye Irritants <input type="checkbox"/> Hot/Cold Extremes <input type="checkbox"/> Pressurized Steam/Condensate <input type="checkbox"/> Pneumatic Energy <input type="checkbox"/> Hydraulic Energy <input type="checkbox"/> Stored Energy <input type="checkbox"/> Noise/Vibration <input type="checkbox"/> Other (specify): _____ | | | | |

Access

- Fixed Ladder
 Portable Ladder
 Stairs
 Door
 Hatch
 Manhole
 Lowering Winch
 Other (specify): _____

Ventilation

- None
 Mechanical
 Favorable Natural (well ventilated)
 Unfavorable Natural (poorly vented)
 Other (specify): _____

Rescue

| | Yes | No |
|---|-----|----|
| Does the space have an internal configuration where non-entry rescue equipment (e.g., tripod and winch) will be effective in rescuing the entrant? | | |
| Does the space have an internal configuration where non-entry rescue equipment (e.g., tripod and winch) may be ineffective in rescuing the entrant, depending on where the work is being performed inside the space? | | |
| Will a standby rescue service be required outside the space if non-entry rescue equipment is ineffective in rescuing the entrant? | | |

Determination

| | Yes | No |
|--|-----|----|
| Is this space a Permit-Required Confined Space? (Answer YES if the risk of atmospheric, engulfment, entrapment, or other serious hazards identified above is high or critical. Answer NO if the risk of atmospheric, engulfment, entrapment, and other serious hazards identified above is low. For moderate risks, make a determination.) | | |

Atmospheric, Engulfment, Entrapment or Other Serious Hazards noted above may require isolation or de-energization prior to entry, in accordance with the Lock Out / Tag Out policy.

Risk Assessment

| | | Consequences - What is the severity of injuries if the risk event actually occurs? | | | | |
|--|--|--|--|--|--|--|
| | | Insignificant <small>No injury, First Aid</small> | Minor <small>Requires First Aid</small> | Moderate <small>Requires External Medical Treatment</small> | Major <small>Serious Injury, Requires Hospitalization</small> | Catastrophic <small>Death or Major Injury</small> |
| Likelihood – How likely is the event to occur at some time in the future | Almost Certain <small>Expected in normal circumstances (100%)</small> | MODERATE RISK | MODERATE RISK | HIGH RISK | CRITICAL RISK | CRITICAL RISK |
| | Likely <small>Probably occur in most circumstances (10%)</small> | MODERATE RISK | MODERATE RISK | HIGH RISK | HIGH RISK | CRITICAL RISK |
| | Possible <small>Might occur at some time (1%)</small> | LOW RISK | MODERATE RISK | MODERATE RISK | HIGH RISK | CRITICAL RISK |
| | Unlikely <small>Could occur at some future time (.1%)</small> | LOW RISK | MODERATE RISK | MODERATE RISK | HIGH RISK | HIGH RISK |
| | Rare <small>Only in exceptional circumstances (.01%)</small> | LOW RISK | LOW RISK | MODERATE RISK | MODERATE RISK | HIGH RISK |
| | Never <small>The possibility is indistinguishable from 0%</small> | LOW RISK | LOW RISK | LOW RISK | LOW RISK | LOW RISK |

Notes