

Confined Space Entry Audit Template

General Information

Date:

Auditor Name:

Location:

Confined Space Description:

Permit & Authorization

Entry Permit Available:

☐ Yes ☐ No ☐ N/A

Permit Signed:

☐ Yes ☐ No ☐ N/A

Entry Supervisor:

Atmospheric Testing

Atmosphere Tested:

☐ Yes ☐ No ☐ N/A

Results:

Test Equipment Calibration Date:

Safety Precautions

Communication Established:

☐ Yes ☐ No ☐ N/A

Rescue Plan In Place:

☐ Yes ☐ No ☐ N/A

PPE Used:

Comments / Observations

Details:

Signatures

Auditor Signature:

Date: