

Lifeboat Maintenance Work Permit

Permit No.		Date Issued	
Location		Time	
Lifeboat No.		Vessel/Facility	

WORK DESCRIPTION

Description of work to be performed

PERSONNEL INVOLVED

Name	Company/Dept	Contact

SAFETY PRECAUTIONS

Precautions to be taken	Checked by

ISOLATION/PERMIT CONDITIONS

Item	Status	Remarks

AUTHORIZATION

Person Issuing Permit (Name & Signature)

Date:

Person Receiving Permit (Name & Signature)

Date:

WORK COMPLETION

Work Completed By		Date/Time	
Inspected By		Date/Time	