

Tanker Vessel Gas Freeing Work Permit

1. Permit Details

Permit No.:

Date/Time Issued:

Valid Until:

Vessel Name:

IMO No.:

Location:

Name of Person in Charge:

Department:

2. Description of Work

3. Area to be Gas Freed

4. Associated Hazards

5. Personal Protective Equipment (PPE) Required

6. Gas Testing Results

Location	Tester	O ₂ (%)	LEL (%)	H ₂ S (ppm)	CO (ppm)	Date/Time

7. Checklist Before Commencing Work

8. Permit Authorization

Person Issuing Permit

Signature:

Name:

Date/Time:

Person Receiving Permit

Signature:

Name:

Date/Time:

9. Permit Cancellation/Completion

Work completed on (date/time):

Remarks:

Signature (Person in Charge):