

# FALL PROTECTION WORK PERMIT

## 1. Specific Job/Review Information

Work Package or FPWP #:

Job Description:

Issue Date:

Bldg./Area:

Reviewed By:

\_\_\_\_\_  
*Qualified Person: (Print)*

\_\_\_\_\_  
*Sign*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Safety Representative: (Print)*

\_\_\_\_\_  
*Sign*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Competent Person: (Print)*

\_\_\_\_\_  
*Sign*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Authorized User: (Print)*

\_\_\_\_\_  
*Sign*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Cognizant Supervisor: (Print)*

\_\_\_\_\_  
*Sign*

\_\_\_\_\_  
*Date*

Approved By:

\_\_\_\_\_  
*Cognizant Safety Manager: (Print)*

\_\_\_\_\_  
*Sign*

\_\_\_\_\_  
*Date*

## 2. Fall Hazards in the Work Area (Select the fall hazard(s) from the list below.)

### Hazard Type

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 1. Aerial Lifts                 | <input type="checkbox"/> 2. Balconies          | <input type="checkbox"/> 3. Caissons                       |
| <input type="checkbox"/> 4. Dangerous Equipment          | <input type="checkbox"/> 5. Decks              | <input type="checkbox"/> 6. Excavation Edges               |
| <input type="checkbox"/> 7. Floor Openings               | <input type="checkbox"/> 8. Ladders            | <input type="checkbox"/> 9. Open-sided Floors              |
| <input type="checkbox"/> 10. Perimeter/Leading Edge Work | <input type="checkbox"/> 11. Precast Concrete  | <input type="checkbox"/> 12. Roof Openings                 |
| <input type="checkbox"/> 13. Roof > 4/12 Pitch           | <input type="checkbox"/> 14. Roof ≤ 4/12 Pitch | <input type="checkbox"/> 15. Scaffold Erection/Disassembly |
| <input type="checkbox"/> 16. Scaffold User               | <input type="checkbox"/> 17. Skylight Openings | <input type="checkbox"/> 18. Steel Erection                |
| <input type="checkbox"/> 19. Wall Openings               | <input type="checkbox"/> 20. Window Openings   | <input type="checkbox"/> 21. Other (specify)               |
| <input type="checkbox"/> 22. Other (specify)             |  |  |

## 3. Fall Protection Methods (Select fall protection method(s) from the list below for each hazard identified above.)

### Fall Protection Method (\*\*Must be used with other fall protection method)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> a. CAZ                         | <input type="checkbox"/> b. Crane Anchorage           | <input type="checkbox"/> c. CRAZ                        |
| <input type="checkbox"/> d. Cover or Hatch              | <input type="checkbox"/> e. Designated Area           | <input type="checkbox"/> f. Fall Protection Spotter     |
| <input type="checkbox"/> g. Fall Restraint System       | <input type="checkbox"/> h. Guardrail Offset System   | <input type="checkbox"/> i. Personal Fall Arrest System |
| <input type="checkbox"/> j. PFAS w/ Horizontal Lifeline | <input type="checkbox"/> k. PFAS w/ Vertical Lifeline | <input type="checkbox"/> l. Safety Monitor              |
| <input type="checkbox"/> m. Standard Guardrails         | <input type="checkbox"/> n. Warning Line System       | <input type="checkbox"/> o. Other (specify)             |

## FALL PROTECTION WORK PERMIT (continued)

### 4. Fall Protection Controls

Hazard Type	Fall Protection Method	Location	<b>ADD ROW</b>
			<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>

### 5. Overhead Hazard Protection Methods

For each overhead hazard identified, specify the method(s) of protection for workers below.

#### Hazard Protection Method

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> a. Barricade to Control Access to Area                                   | <input type="checkbox"/> b. Canopy Structure      | <input type="checkbox"/> c. Debris Nets            |
| <input type="checkbox"/> d. Hard Hats Required  | <input type="checkbox"/> e. Overhead Hazard Signs | <input type="checkbox"/> f. Screens on Guard Rails |
| <input type="checkbox"/> g. Toe Boards on Guard Rails <input type="checkbox"/> h. Other (specify) |   |  |

### 6. Fall Protection System Assembly

#### Guard Rail System

System Component List (lumber, pipe, wire rope, etc.):  N/A

**Personal Fall Arrest System**  N/A

**Fall Restraint System**  N/A

System Component List (Anchorage, Connector, Lanyard, Harness, etc.):

Anchorage(s) Certified     Non - Certified

Configuration and placement sketch attached?  Yes     No

Anchorage above shoulder height?  Yes     No

Other Instructions:

## FALL PROTECTION WORK PERMIT (continued)

**Covers or Hatches**  N/A

Maximum intended load/vehicle axle weight: \_\_\_\_\_

Materials to use:

Employee designated to secure hatch:

**Warning Line System**  N/A

**Designated Area**  N/A

System Component List (rope, flagging, stanchions, etc.):

Configuration and placement sketch attached?  Yes  No

Fall Protection Spotter(s) (optional):  N/A

Monitor(s):  N/A

**Controlled Access Zone**  Overhand  Leading Edge  Precast  N/A

**Reason Conventional Fall Protection Not Used:**

**Methods taken to Reduce/Eliminate Fall Hazards:**

**Other Methods to provide safe working surface / reduce hazard of falling:**

Configuration and placement sketch attached?  Yes  No

## FALL PROTECTION WORK PERMIT (continued)

### **Other Fall Protection System**

Description of how system is assembled, disassembled, operated, inspected, and maintained, including specifications for materials to be used in its construction:

### **7. Rescue Plan**

If an employee falls and is suspended from a PFAS the HFD Rescue Team shall be notified immediately by calling 911 or (509) 373-0911.

Other Instructions:

## FALL PROTECTION WORK PERMIT (continued)

Authorized Users of Work Plan or FPWP #

Reviewed By:

<hr/> <i>Name (Print)</i>	<hr/> <i>Sign</i>	<hr/> <i>Date</i>
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