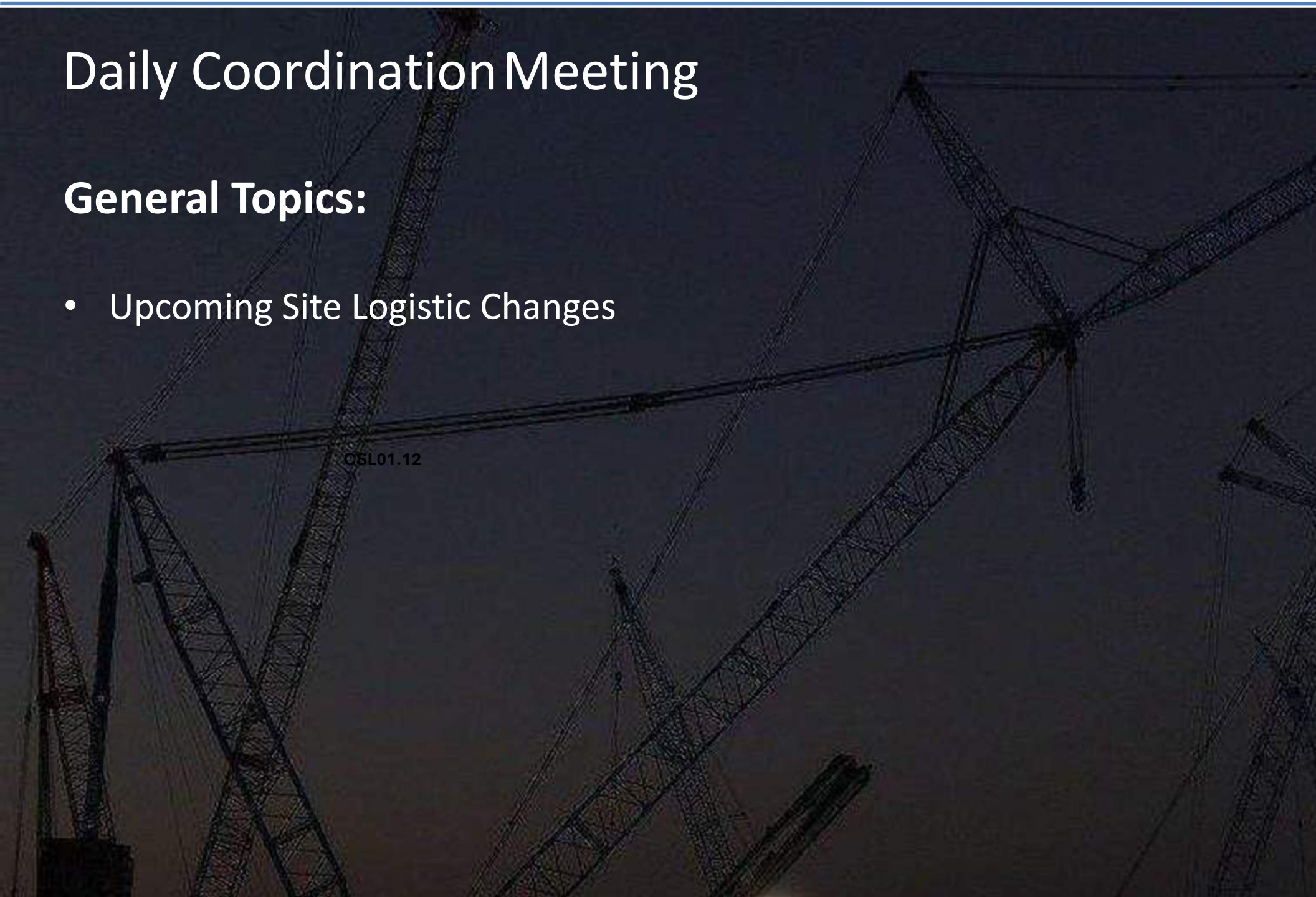
Daily Coordination Meeting

Daily Coordination Meeting

General Topics:

- Upcoming Site Logistic Changes



OSL01.12


Scrubber 2 curb
7:00am
NETD 5RA SOMD
5:00am

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HOFFMAN Sparrow

UTILITY LEVEL

TOOL TOWERS / NO STORAGE FROM March 16

CHEMO / AFCON e

HOFFMAN CONSTRUCTION COMPANY

HOFFMAN Sparrow

UTILITY LEVEL

TOOL TOWERS / NO STORAGE FROM March 16

HOFFMAN CONSTRUCTION COMPANY

HOFFMAN Sparrow

UTILITY LEVEL

TOOL TOWERS / NO STORAGE FROM March 16

MEGASON / AFCON e

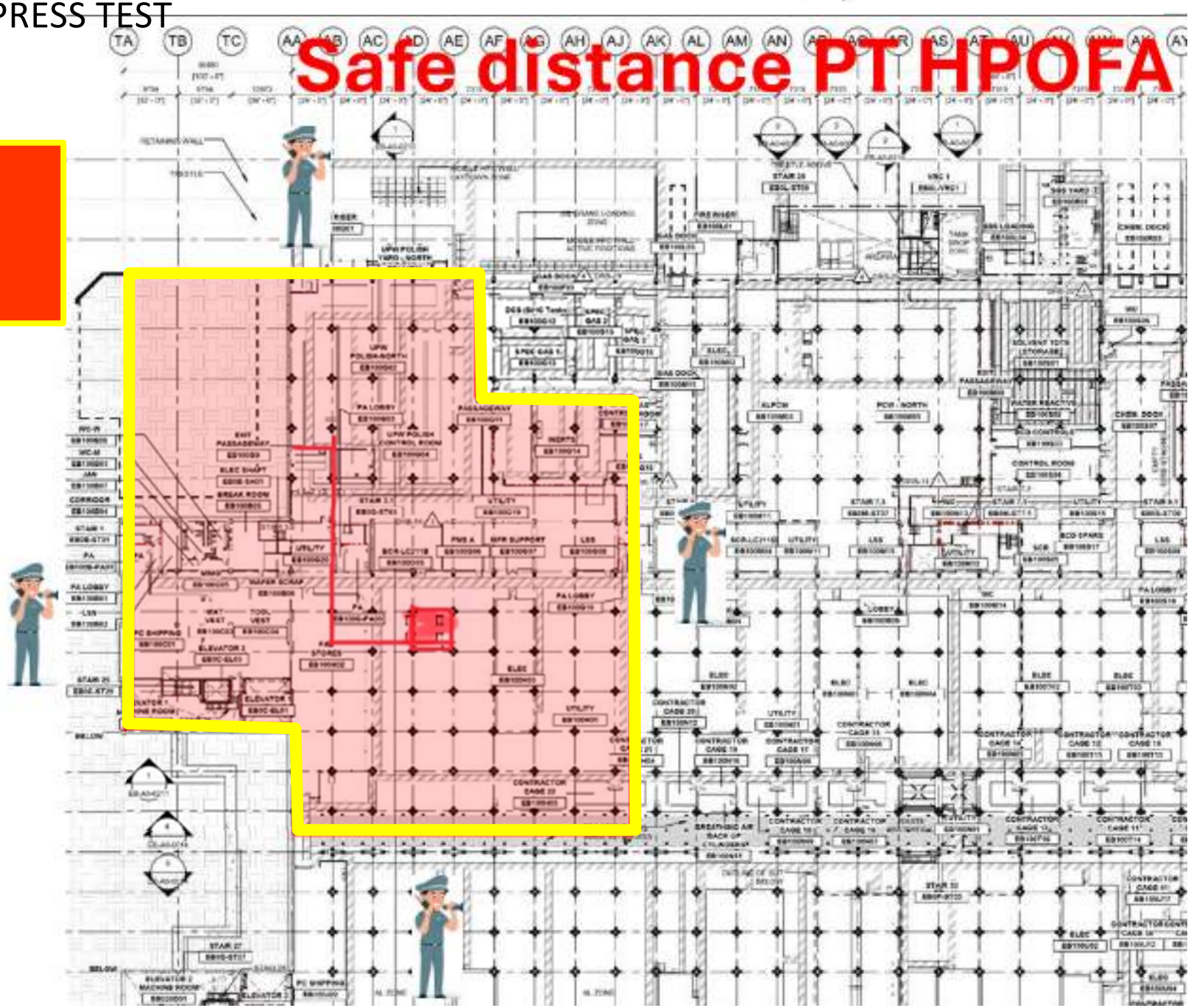
HOFFMAN CONSTRUCTION COMPANY

HOFFMAN Sparrow

UTILITY LEVEL PRESS TEST

Safe distance PT HPOFA

Lesico
HPOFA test
3/11
From 17:00
till 5:00



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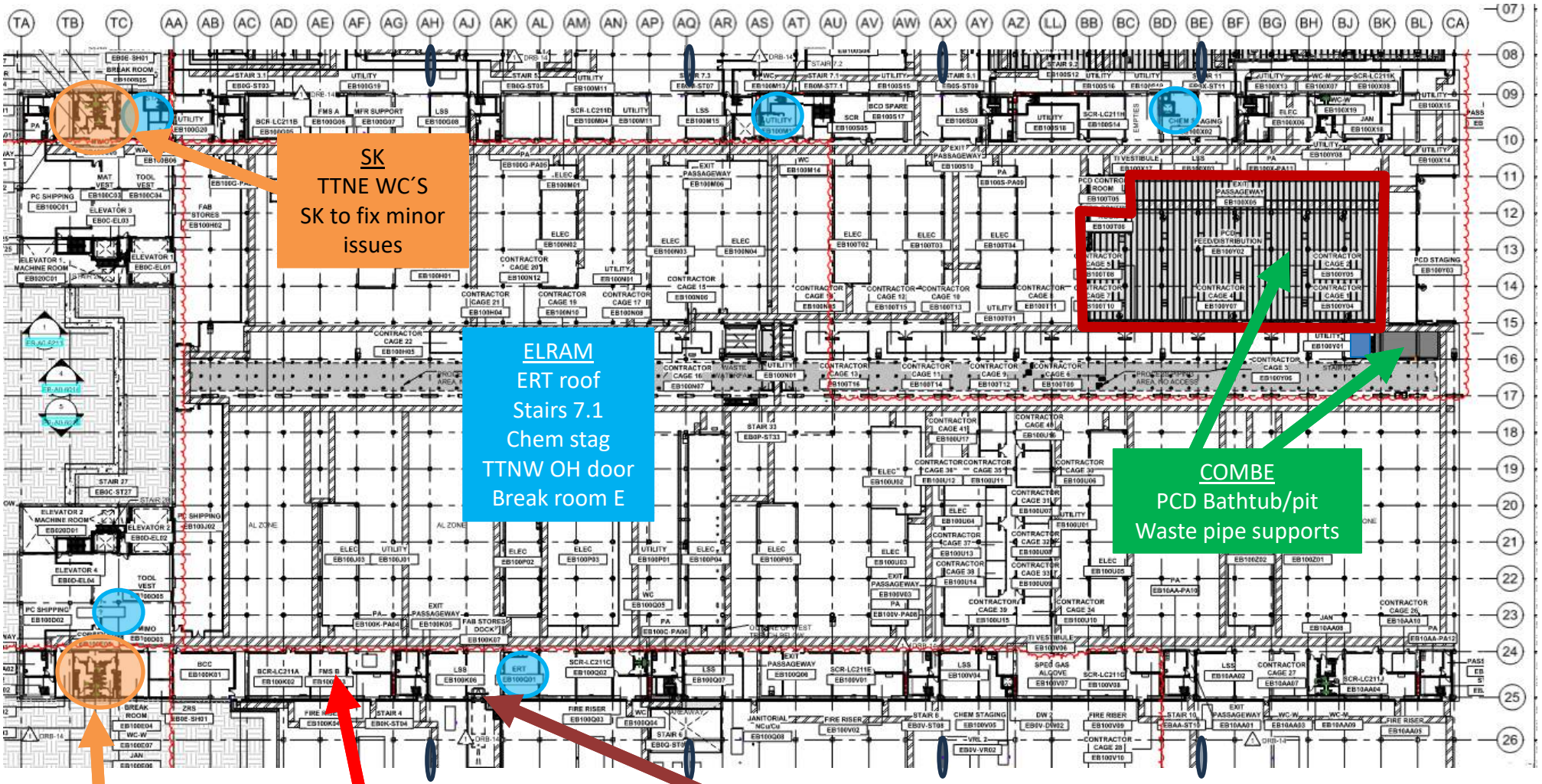
UTILITY LEVEL MOD1



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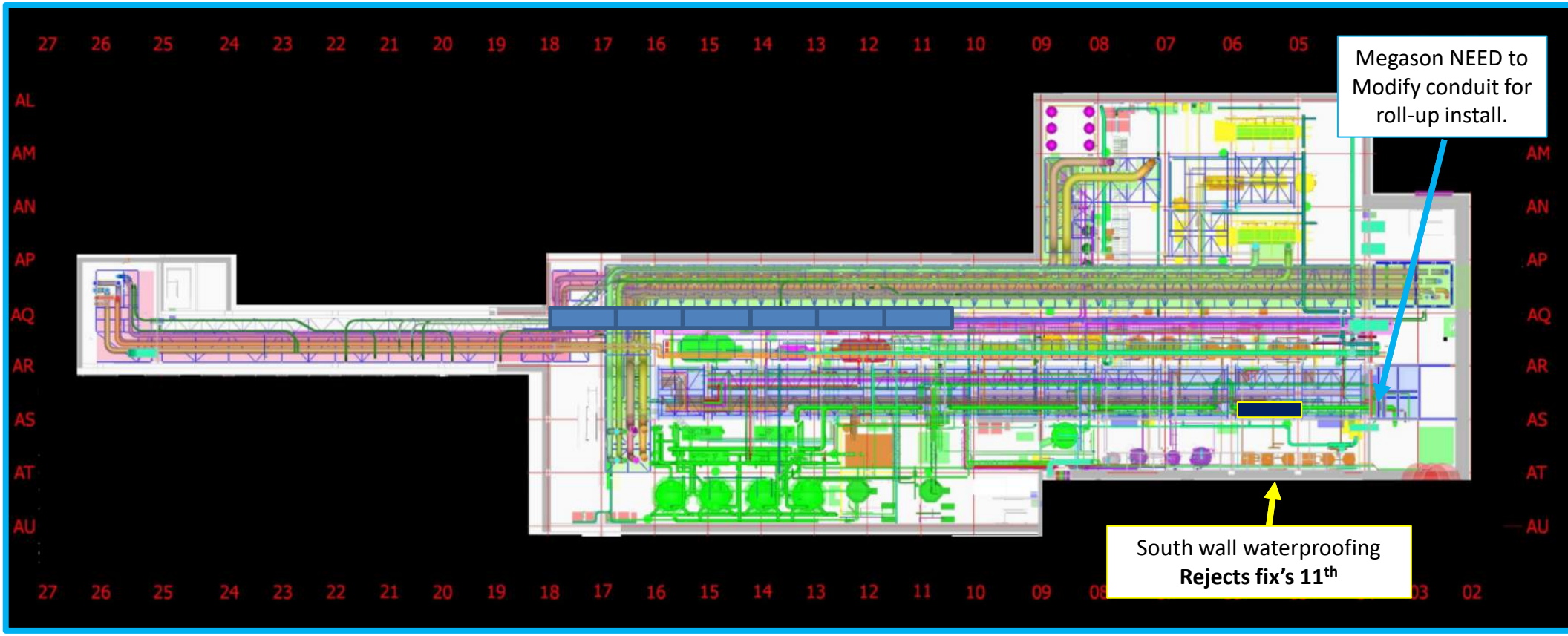
SUT 38.1 LEVEL



IK2

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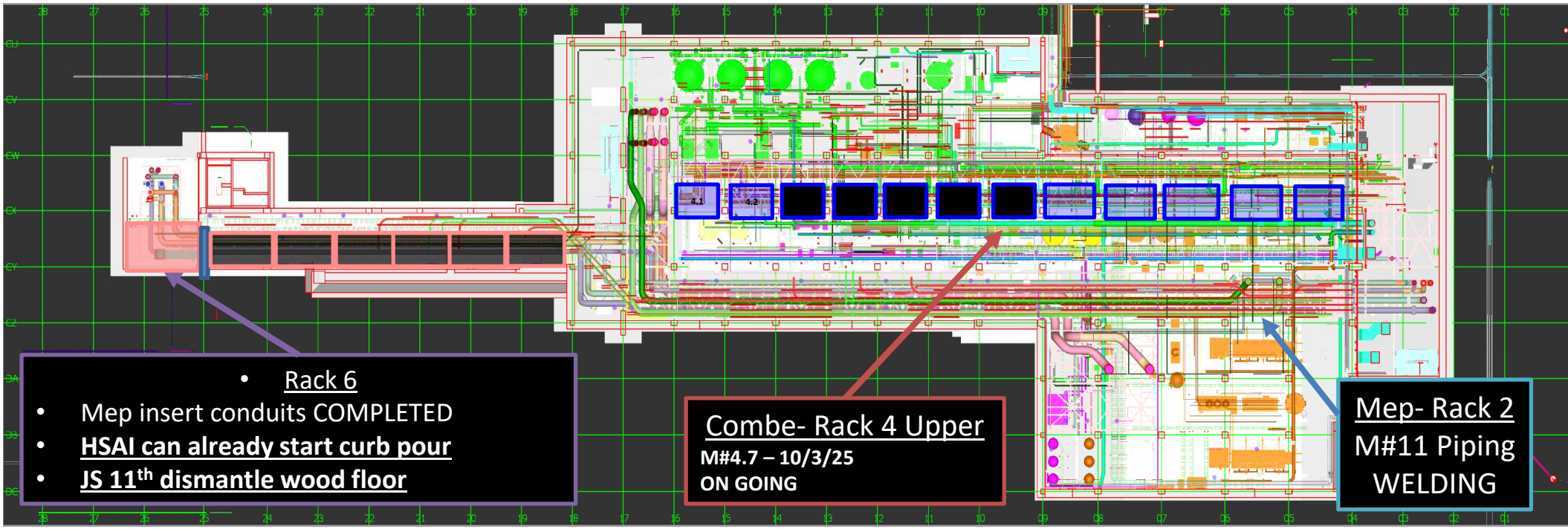
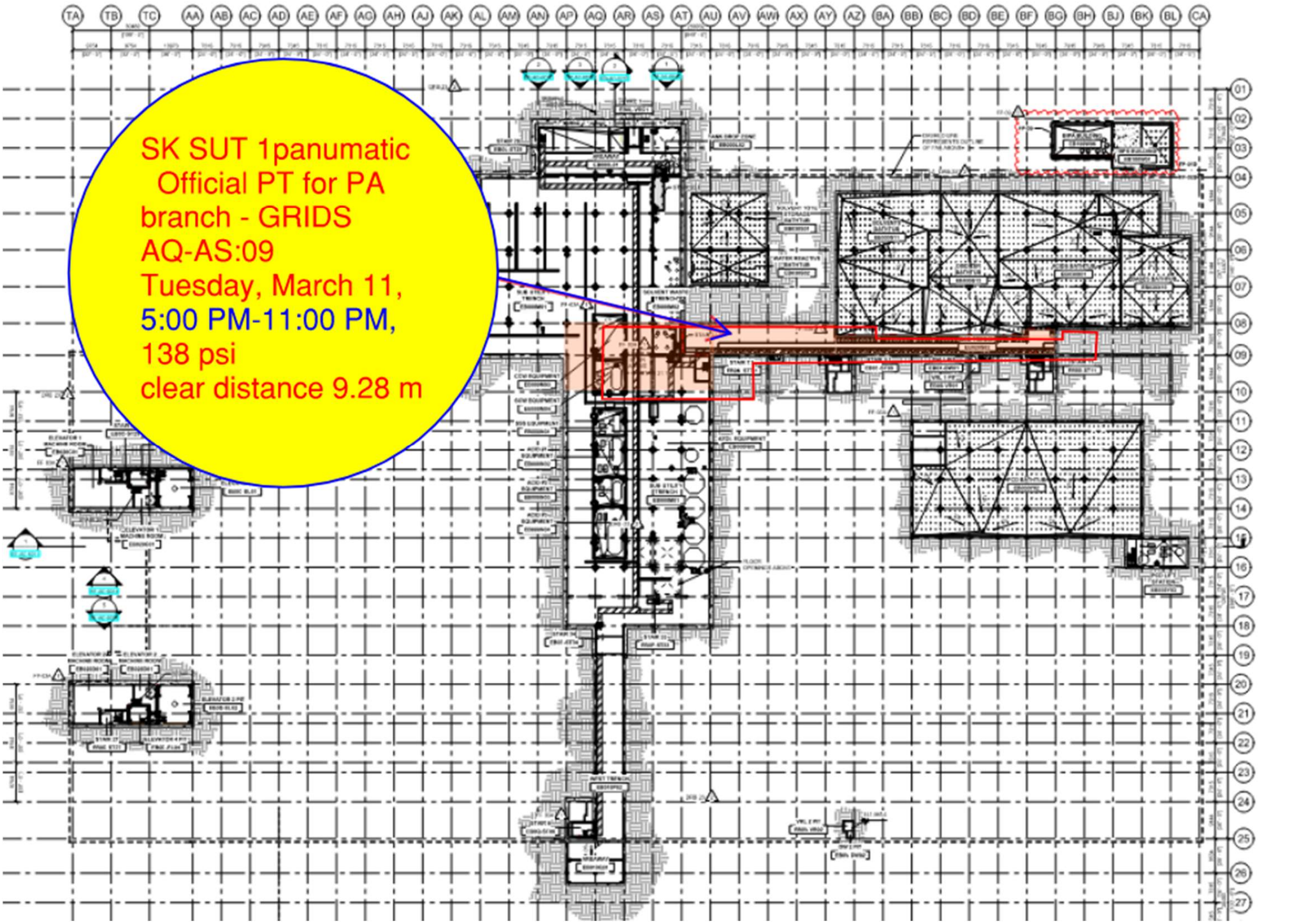
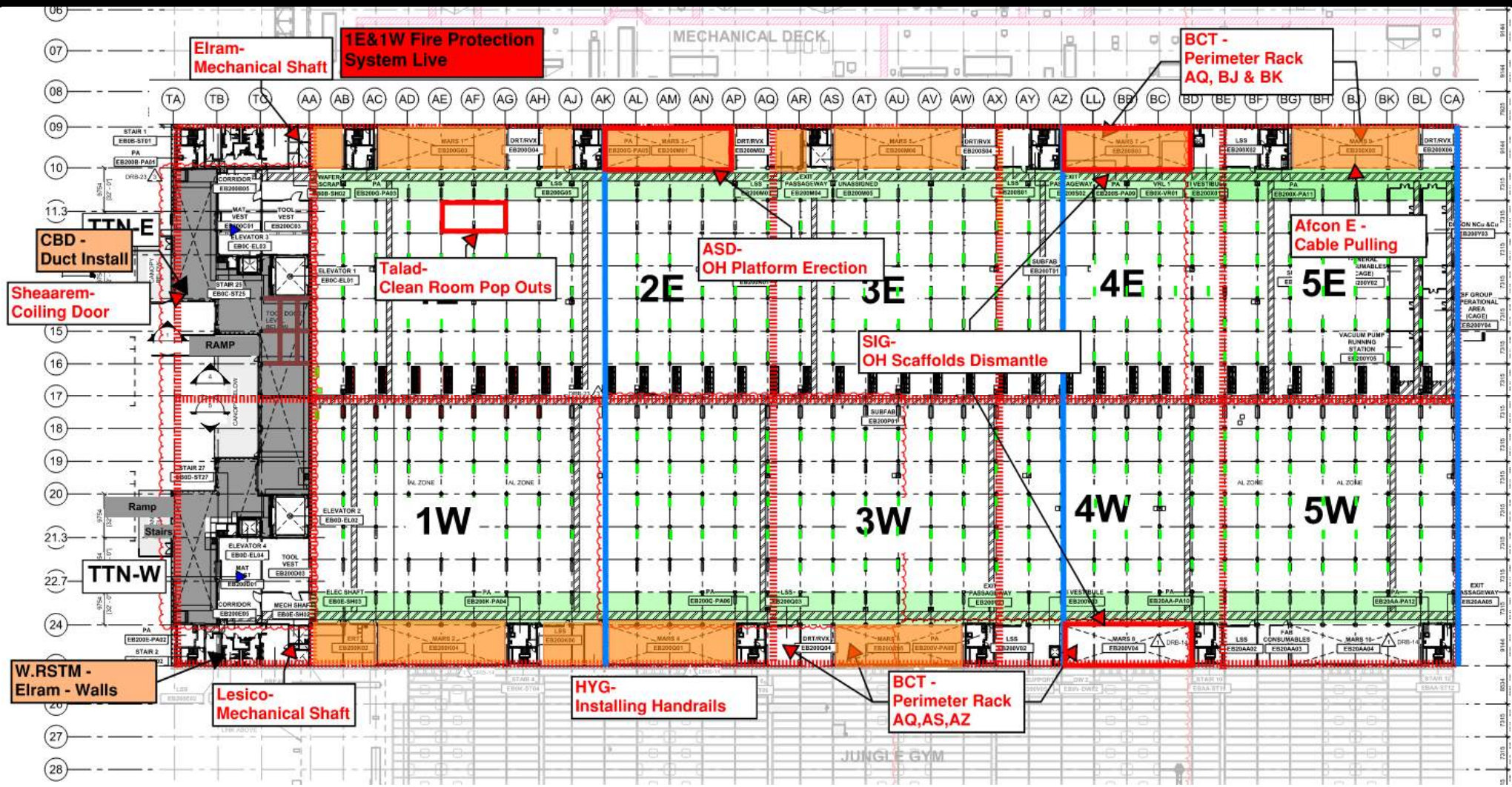
SUT 38.2 LEVEL



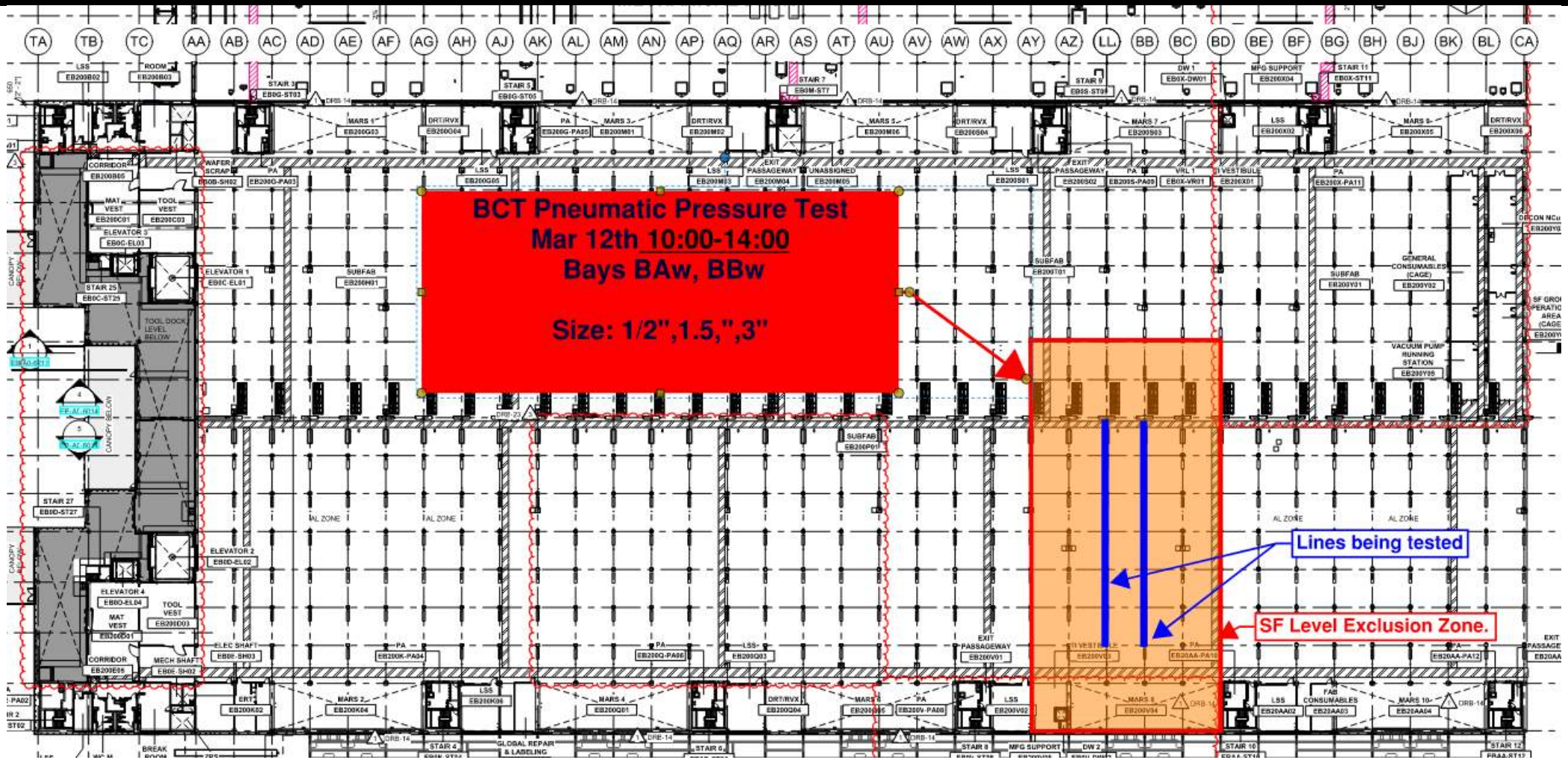
IK2 Ibrahim Krinawi, 3/5/2025


SK SUT 1panumatic
Official PT for PA
branch - GRIDS
AQ-AS:09
Tuesday, March 11,
5:00 PM-11:00 PM,
138 psi
clear distance 9.28 m

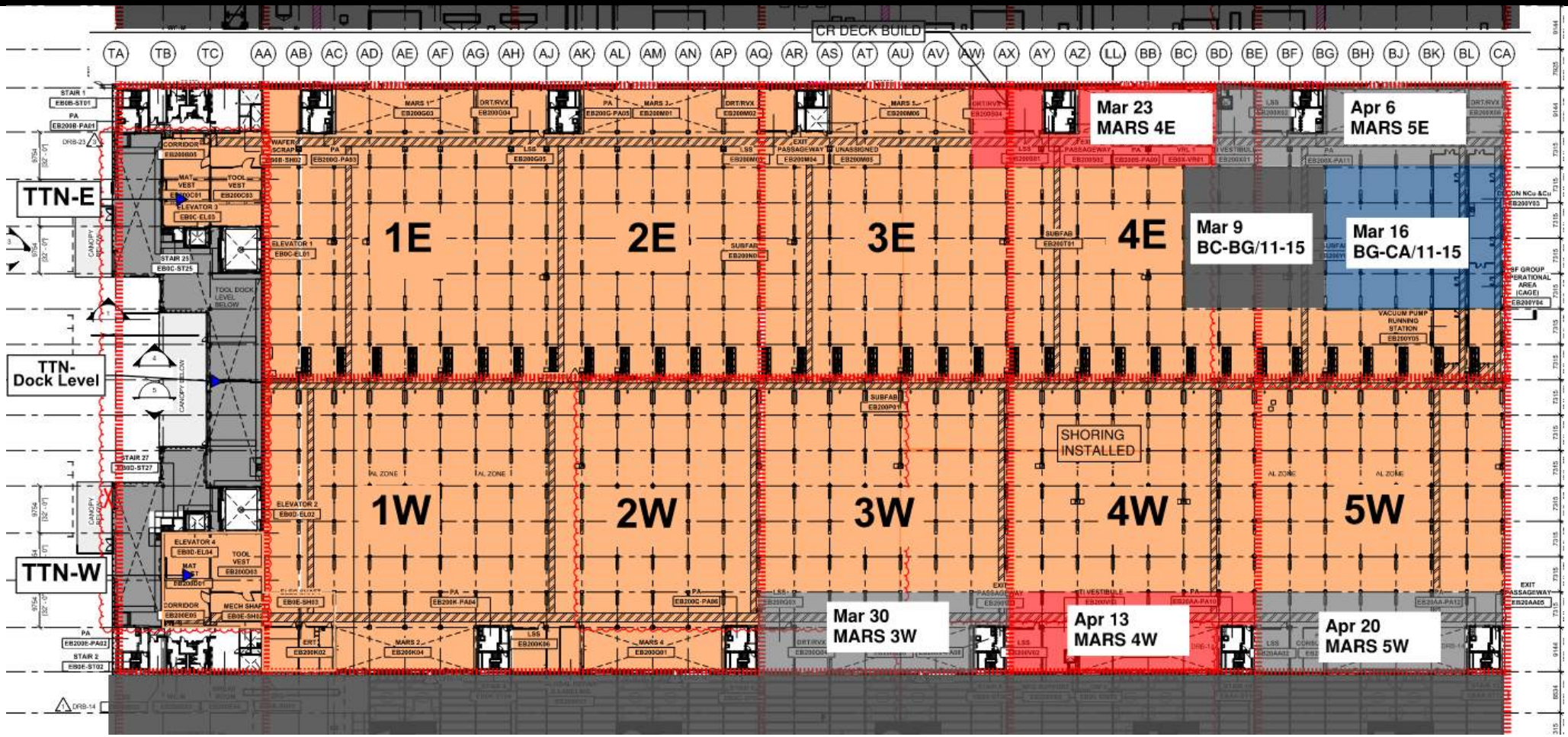
SUBFAB BUILDOUT MOD 1



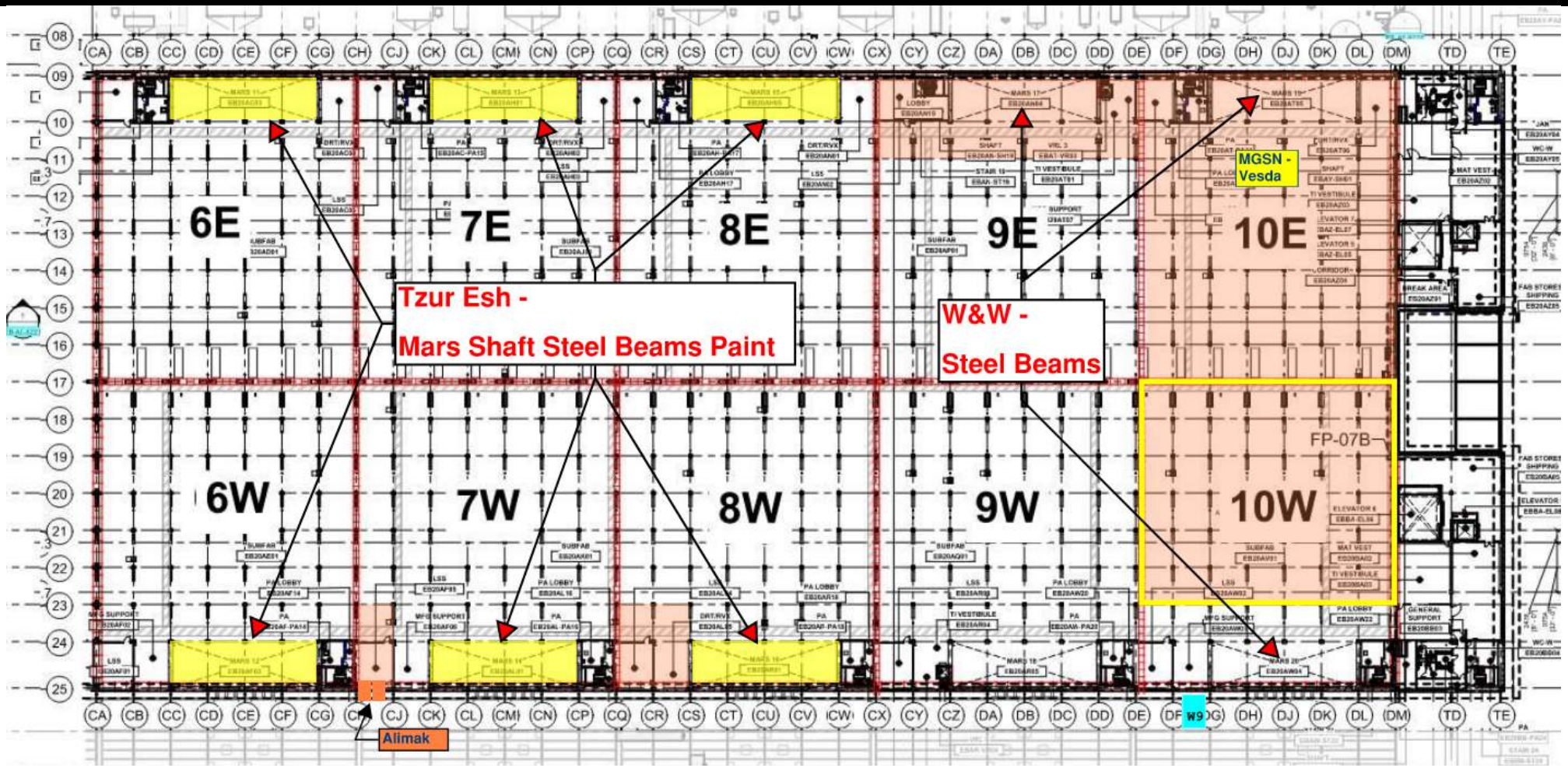
BCT Pressure Test Tomorrow

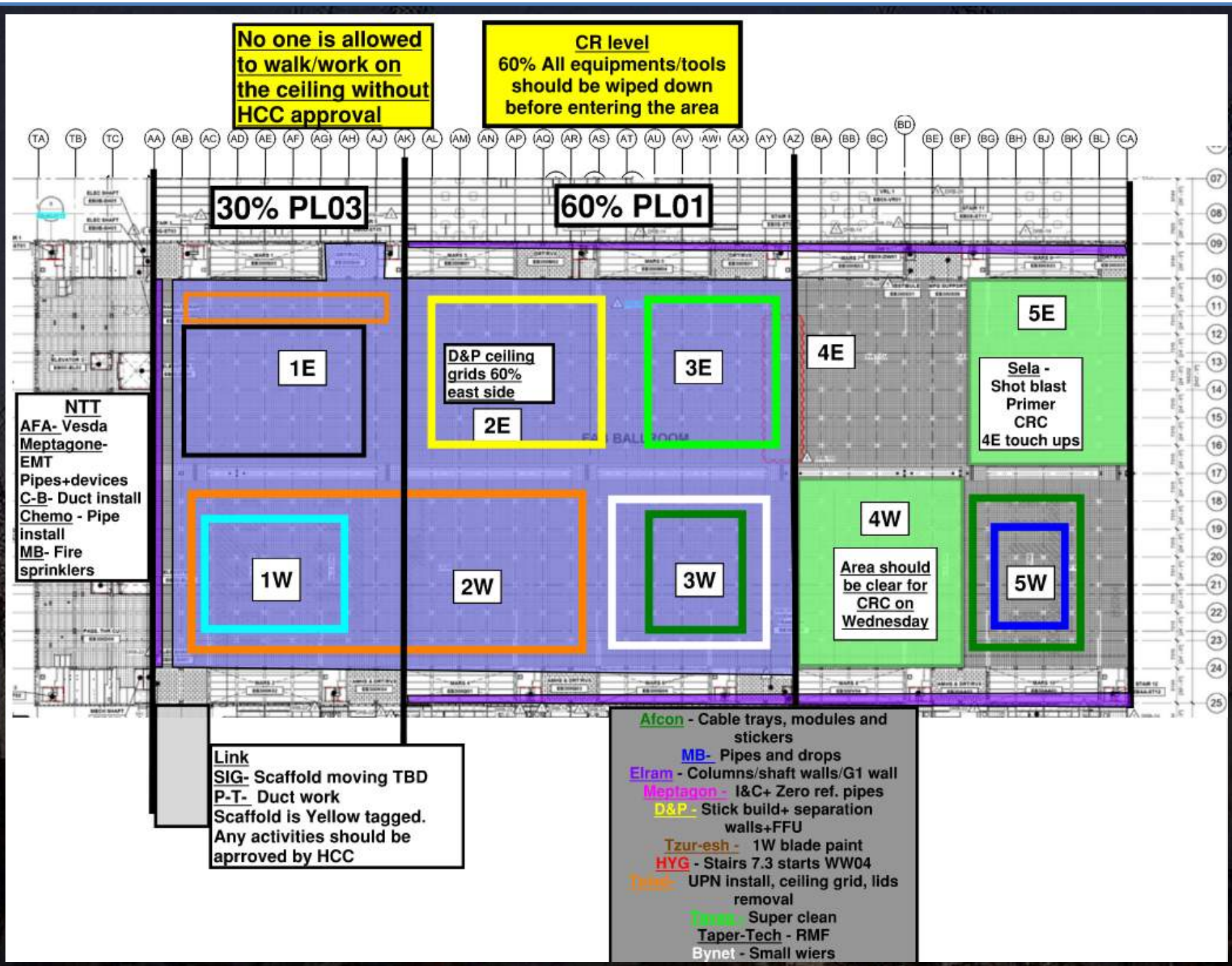


SUBFAB CRC TOPCOAT



SUBFAB BUILDOUT MOD2




No one is allowed to walk/work on the ceiling without HCC approval
CR level
60% All equipments/tools should be wiped down before entering the area
30% PL03
60% PL01
1E
2E
D&P ceiling grids 60% east side
3E
4E
5E
Sela - Shot blast Primer CRC 4E touch ups
1W
2W
3W
4W
Area should be clear for CRC on Wednesday
5W
NTT
AFA- Vesda
Meptagone- EMT Pipes+devices
C-B- Duct install
Chemo - Pipe install
MB- Fire sprinklers
Link
SIG- Scaffold moving TBD
P-T- Duct work
Scaffold is Yellow tagged.
Any activities should be aprroved by HCC
Afcon - Cable trays, modules and stickers
MB- Pipes and drops
Elram - Columns/shaft walls/G1 wall
Meptagon - I&C+ Zero ref. pipes
D&P - Stick build+ separation walls+FFU
Tzur-esh - 1W blade paint
HYG - Stairs 7.3 starts WW04
Taper-Tech - RMF
Bynet - Small wiers

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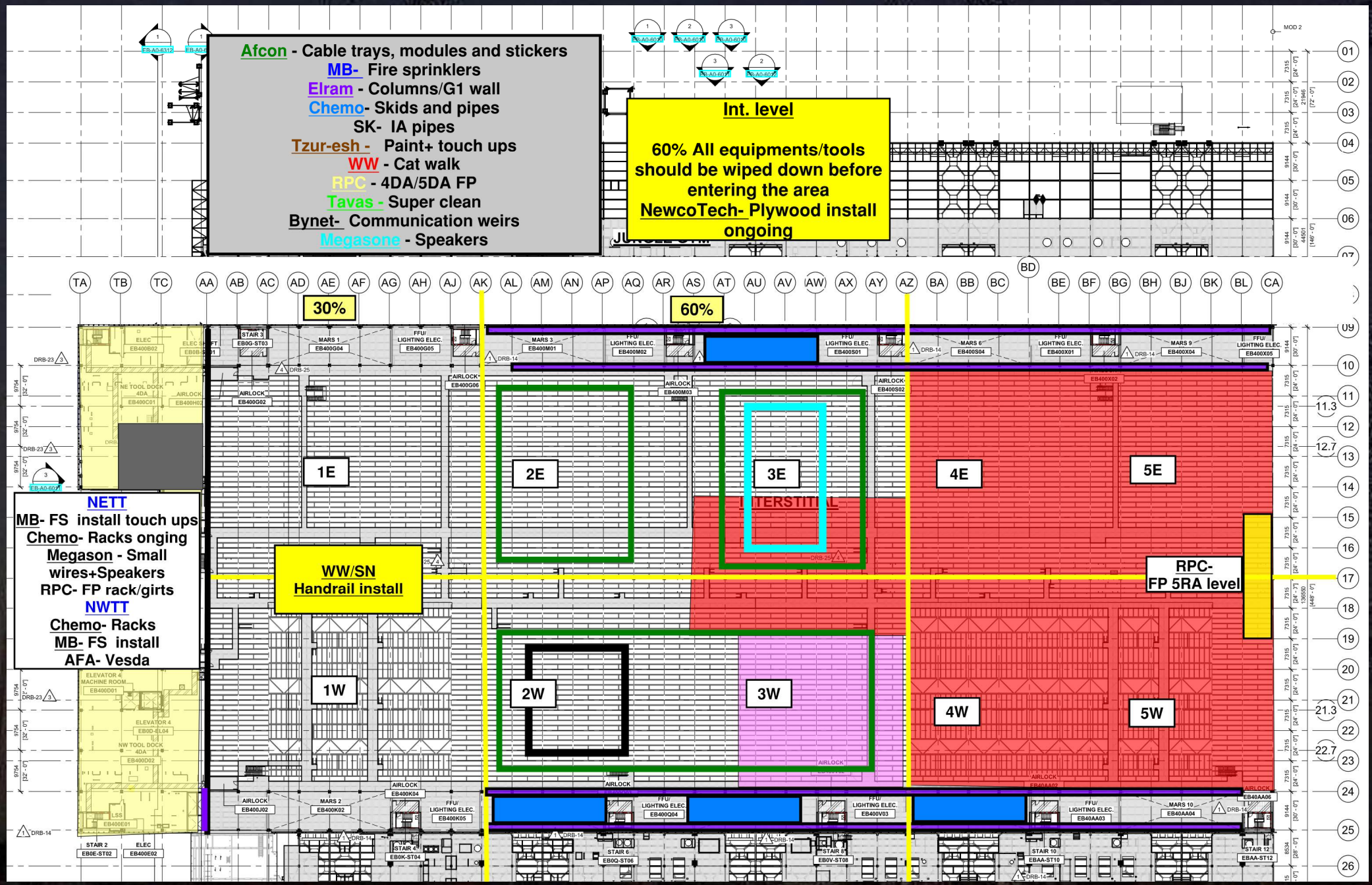
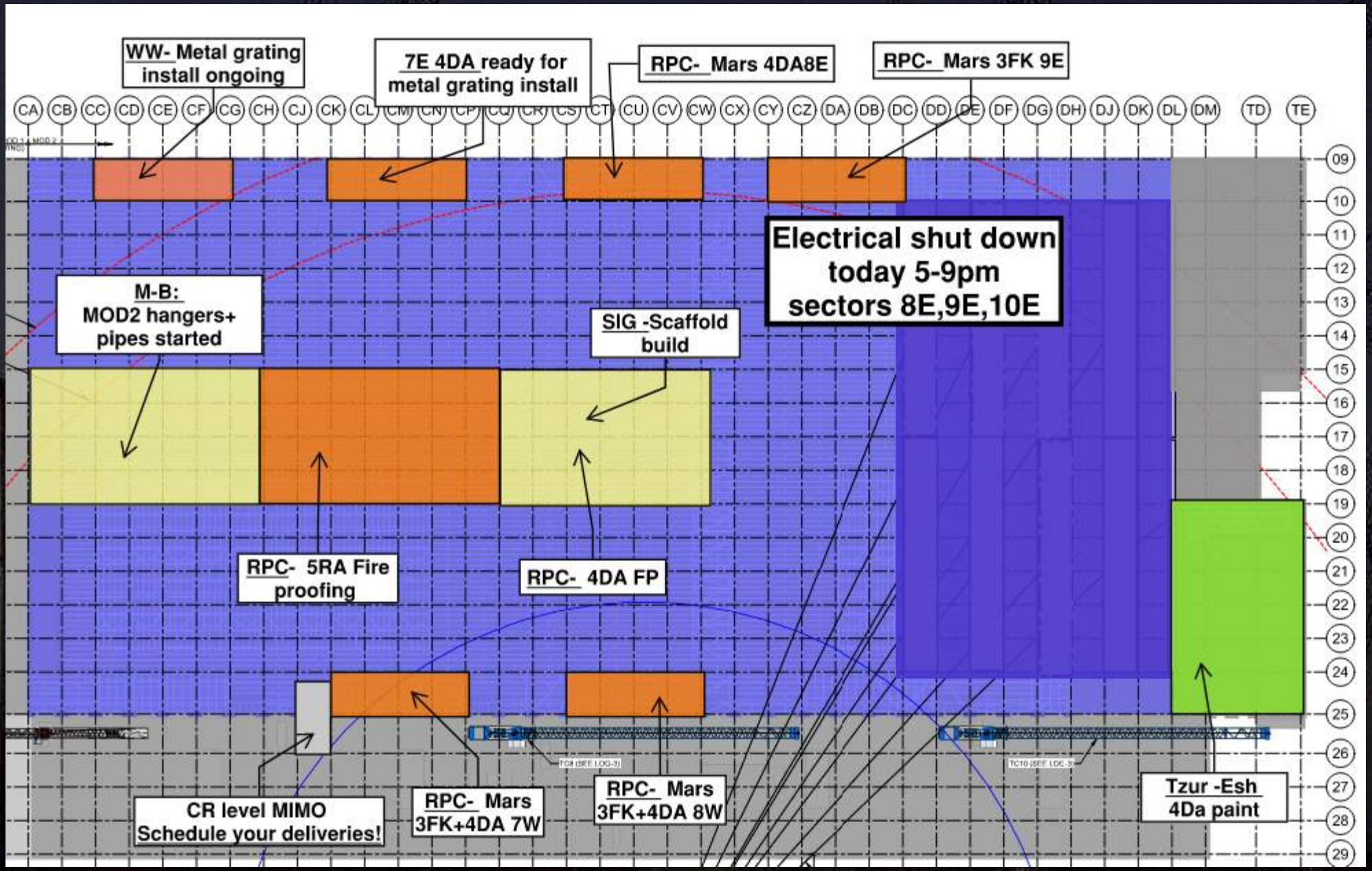
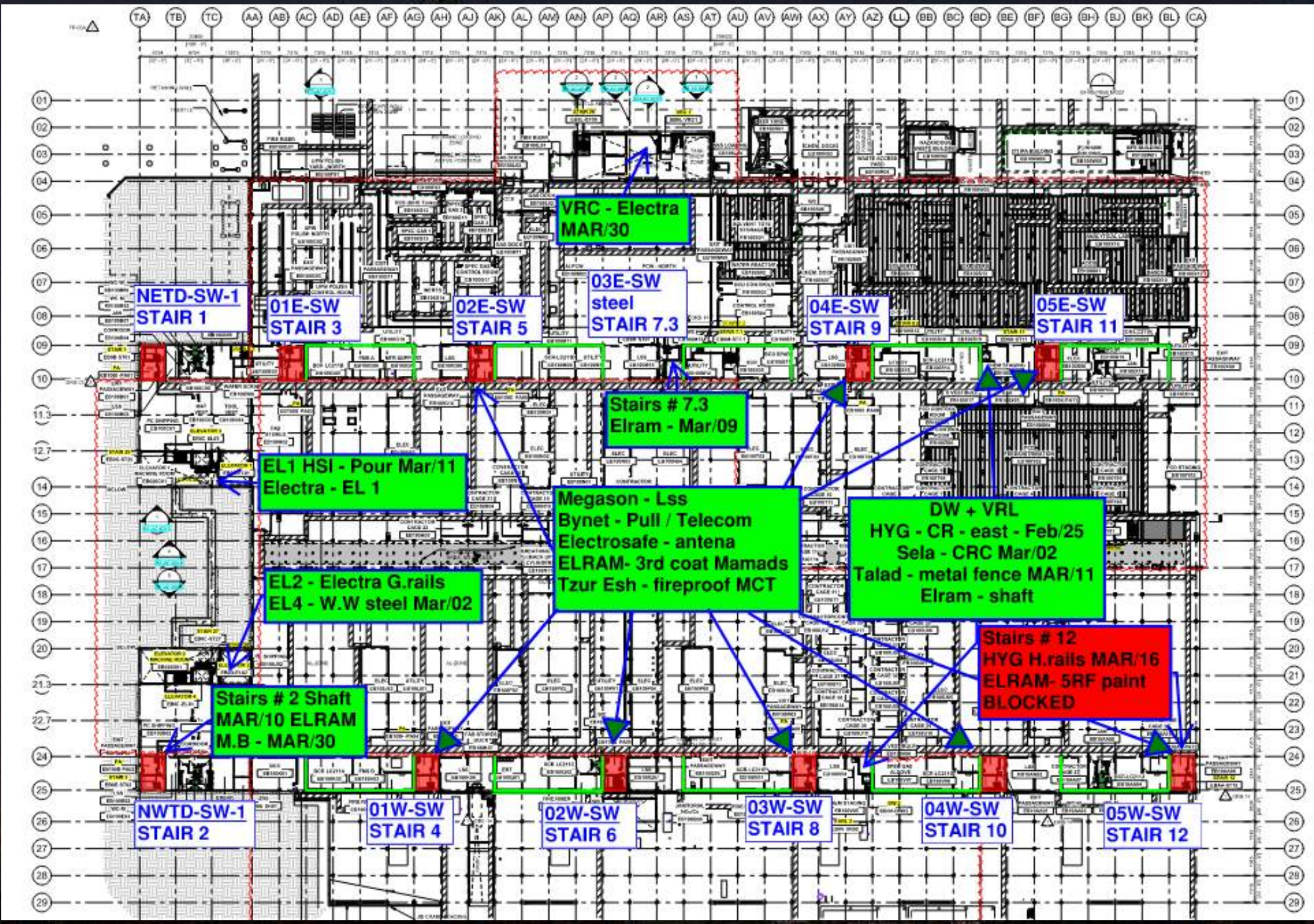
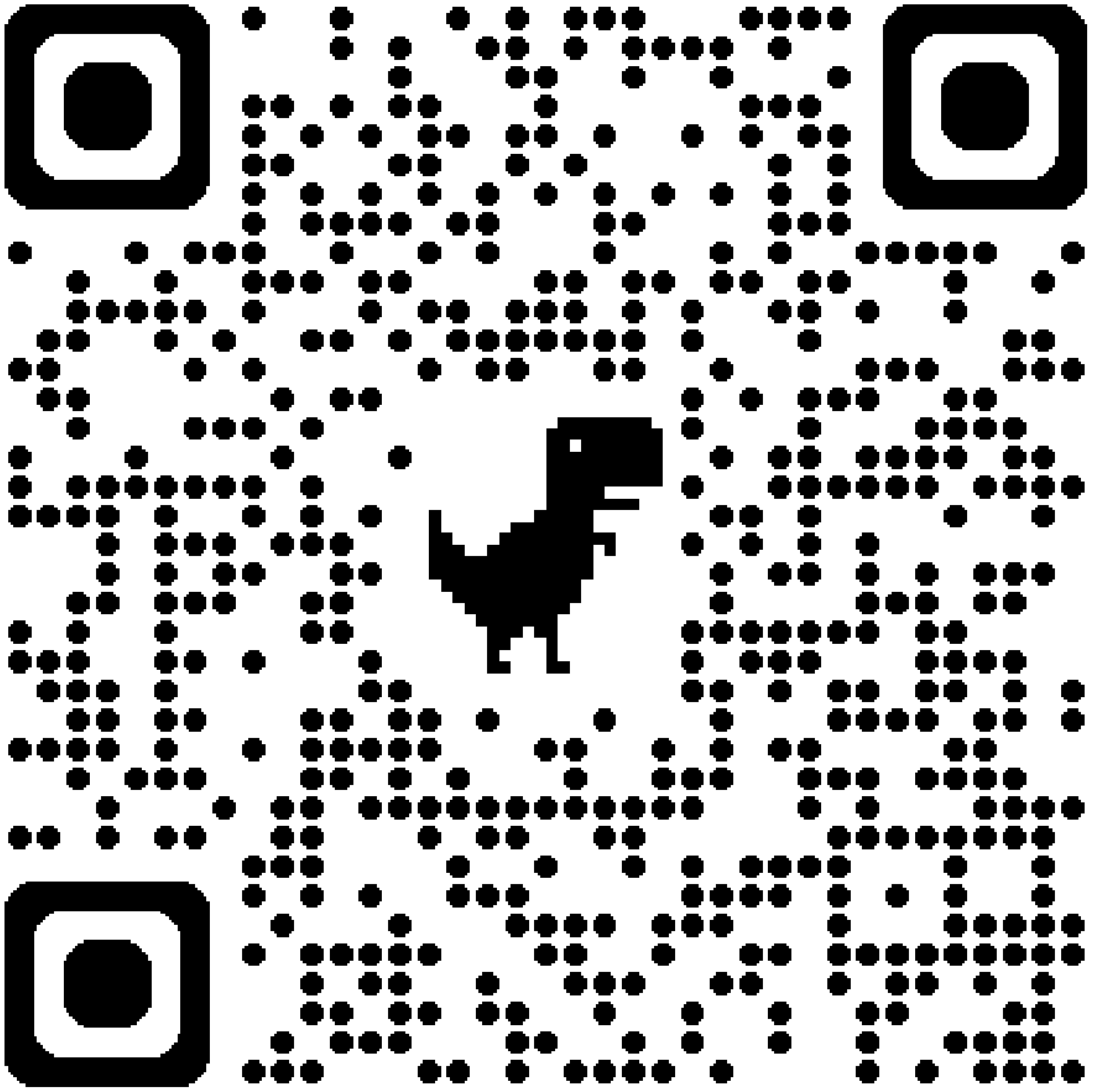



WW- Metal grating install ongoing
7E 4DA ready for metal grating install
RPC- Mars 4DA8E
RPC- Mars 3FK 9E
Electrical shut down today 5-9pm sectors 8E,9E,10E
M-B: MOD2 hangers+ pipes started
SIG -Scaffold build
RPC- 5RA Fire proofing
RPC- 4DA FP
CR level MIMO Schedule your deliveries!
RPC- Mars 3FK+4DA 7W
RPC- Mars 3FK+4DA 8W
Tzur -Esh 4Da paint

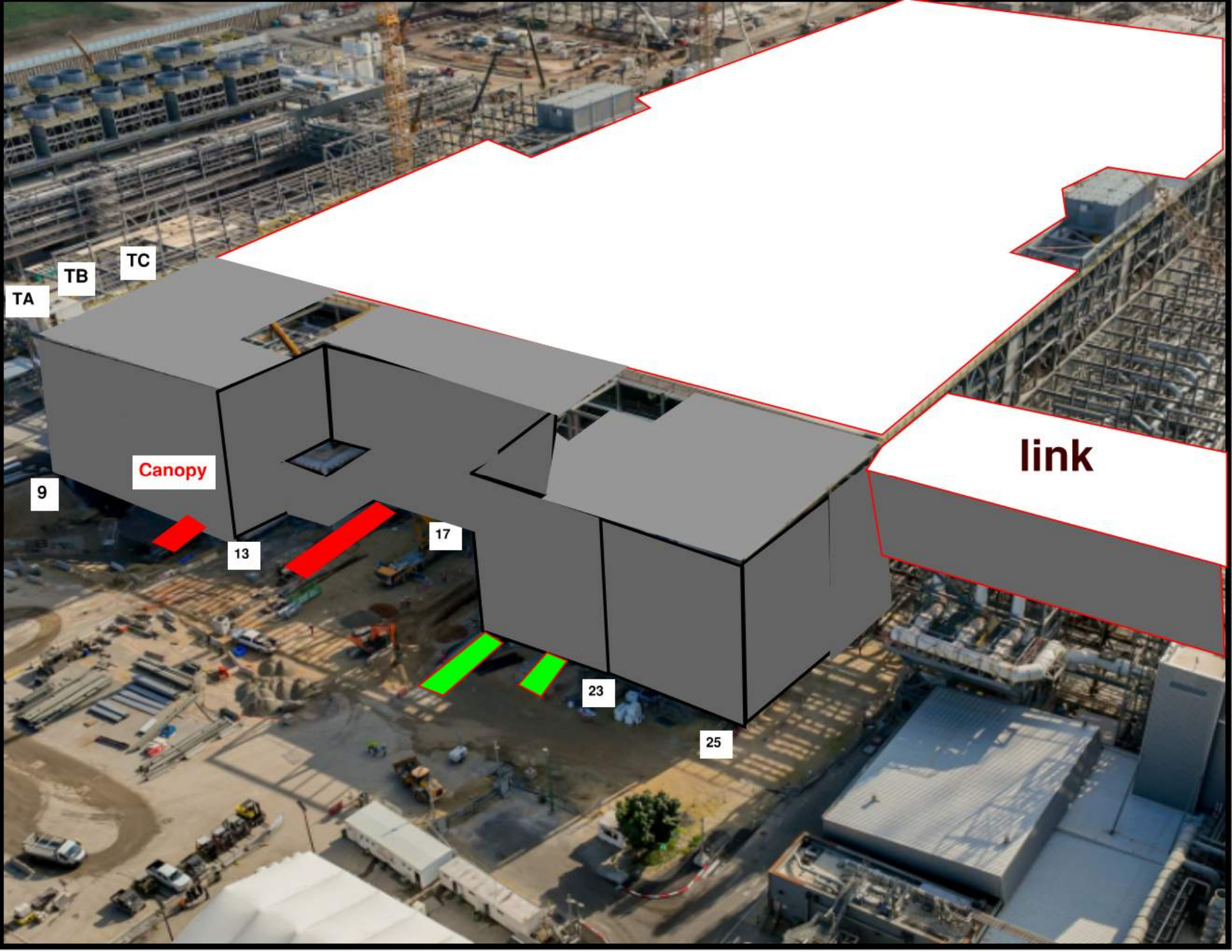
Wall Of Shame

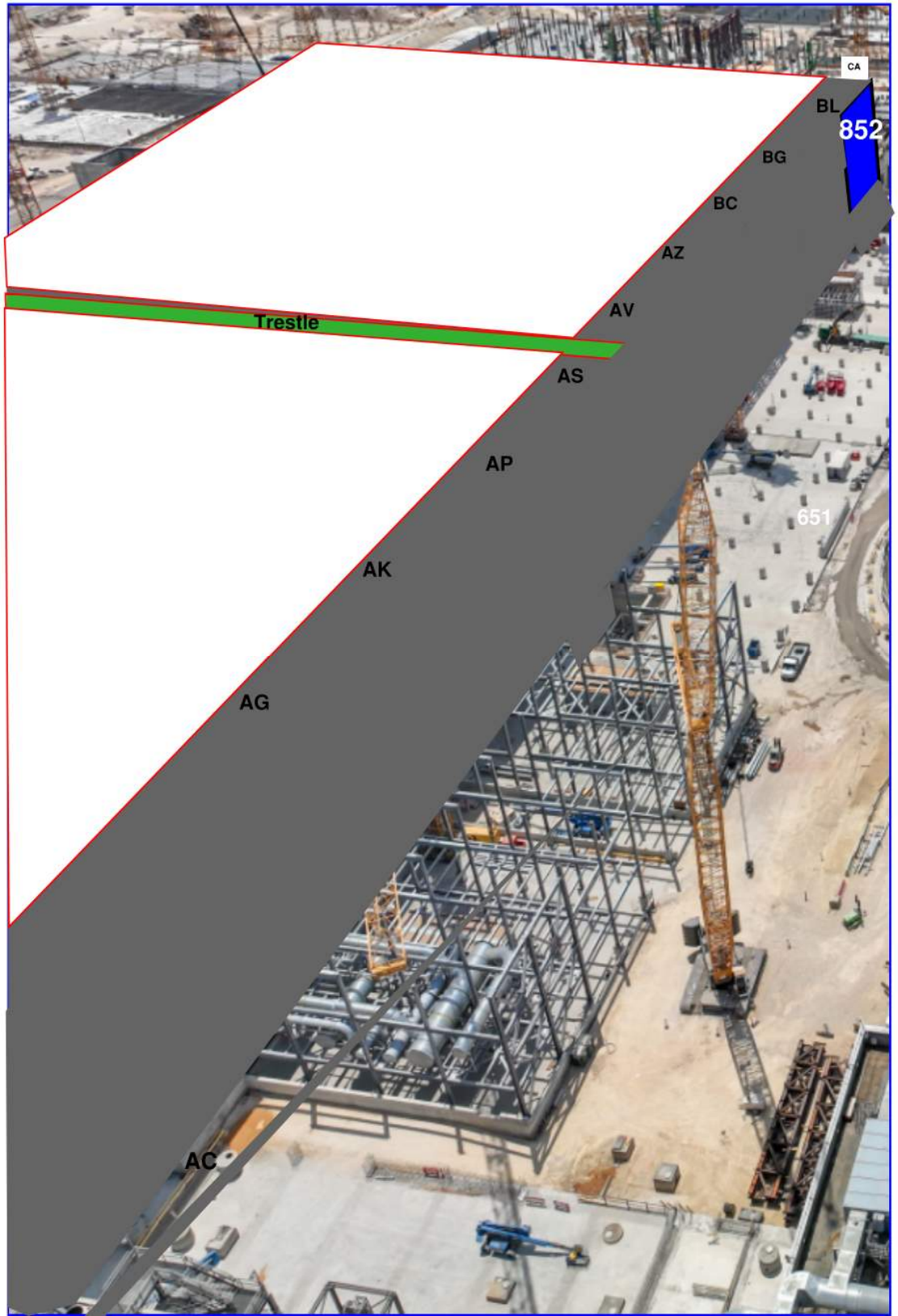

VRC - Electra
MAR/30
NETD-SW-1
STAIR 1
01E-SW
STAIR 3
02E-SW
STAIR 5
03E-SW
steel
STAIR 7.3
04E-SW
STAIR 9
05E-SW
STAIR 11
Stairs # 7.3
Elram - Mar/09
EL1 HSI - Pour Mar/11
Electra - EL 1
Megason - Lss
Bynet - Pull / Telecom
Electrosafe - antena
ELRAM- 3rd coat Mamads
Tzur Esh - fireproof MCT
DW + VRL
HYG - CR - east - Feb/25
Sela - CRC Mar/02
Talad - metal fence MAR/11
Elram - shaft
EL2 - Electra G.rails
EL4 - W.W steel Mar/02
Stairs # 12
HYG H.rails MAR/16
ELRAM- 5RF paint
BLOCKED
Stairs # 2 Shaft
MAR/10 ELRAM
M.B - MAR/30
NWTD-SW-1
STAIR 2
01W-SW
STAIR 4
02W-SW
STAIR 6
03W-SW
STAIR 8
04W-SW
STAIR 10
05W-SW
STAIR 12

Siding Penetration Request Form

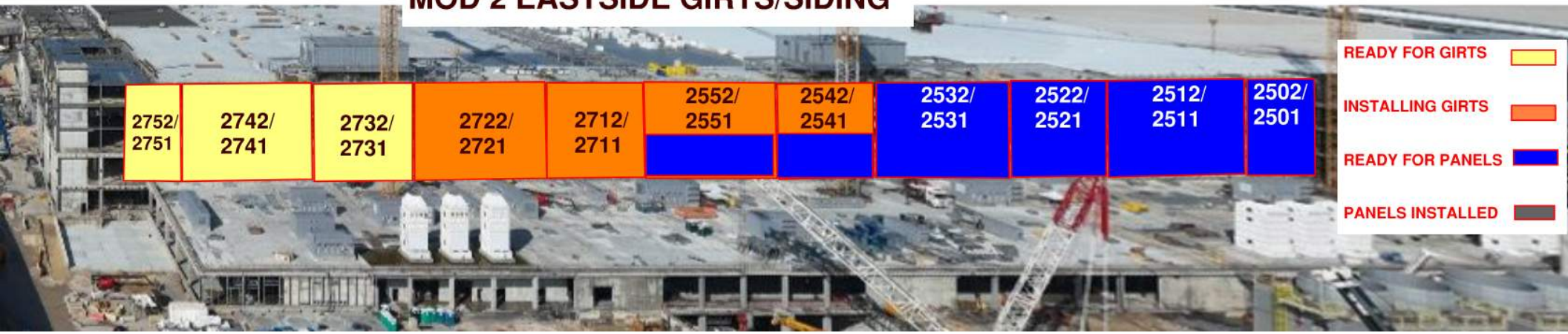


Subcontractor must fill out and submit all required cells in order to get a penetration cut through the siding.


TA
TB
TC
Canopy
9
13
17
23
25
link


CA
BL
852
BG
BC
AZ
AV
Trestle
AS
AP
651
AK
AG
AC

MOD 2 EASTSIDE GIRTS/SIDING

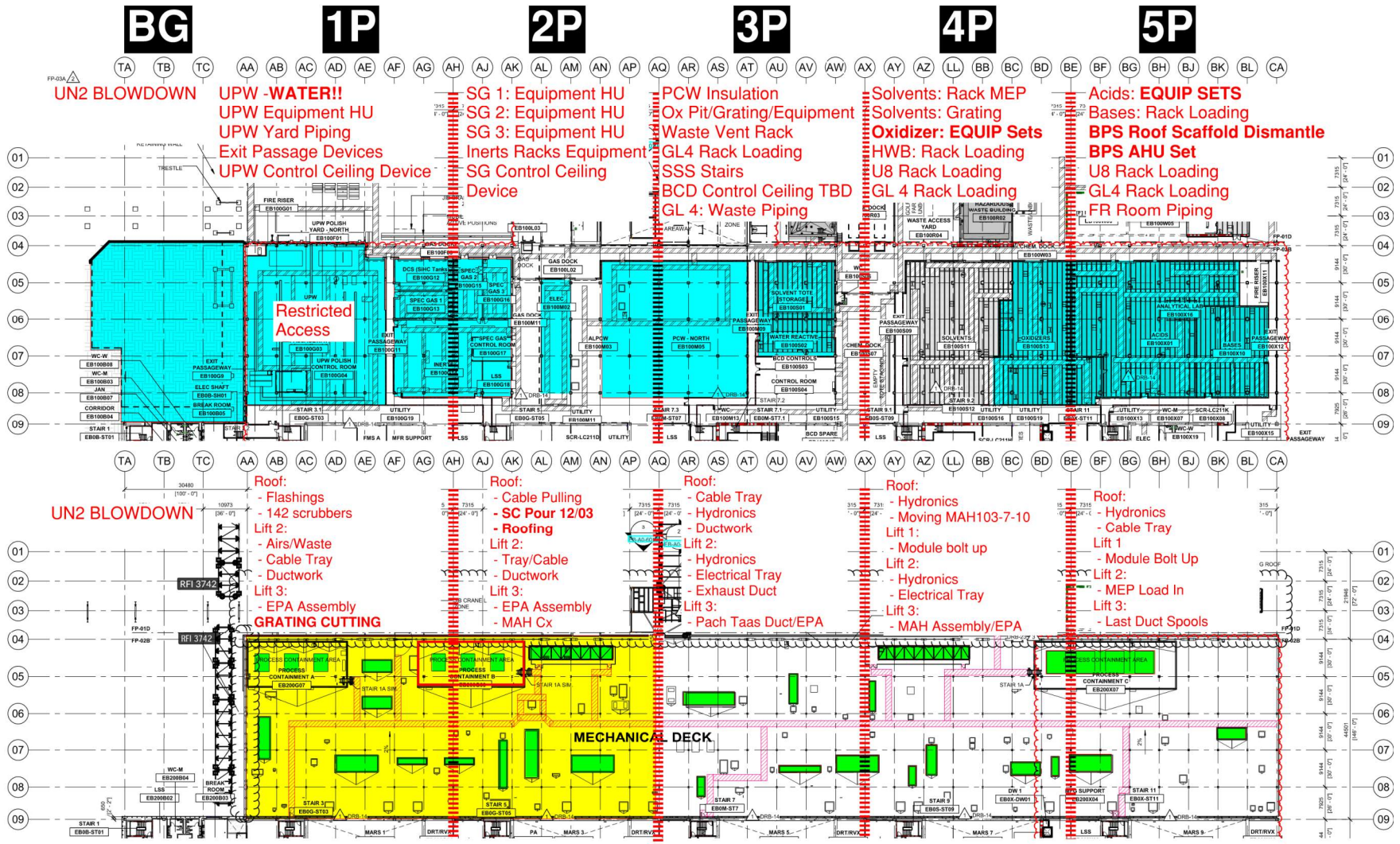



MOD 2 WESTSIDE GIRTS/SIDING
READY FOR GIRTS
INSTALLING GIRTS
READY FOR PANELS
PANELS INSTALLED
2602/ 2601
MIMO
2612/ 2611
MIMO
2622/ 2621
2632/ 2631
2642/ 2641
2652/ 2651
2812/ 2811
2822/ 2821
2832/ 2831
2842/ 2841
2852/ 2851

PSSS.1

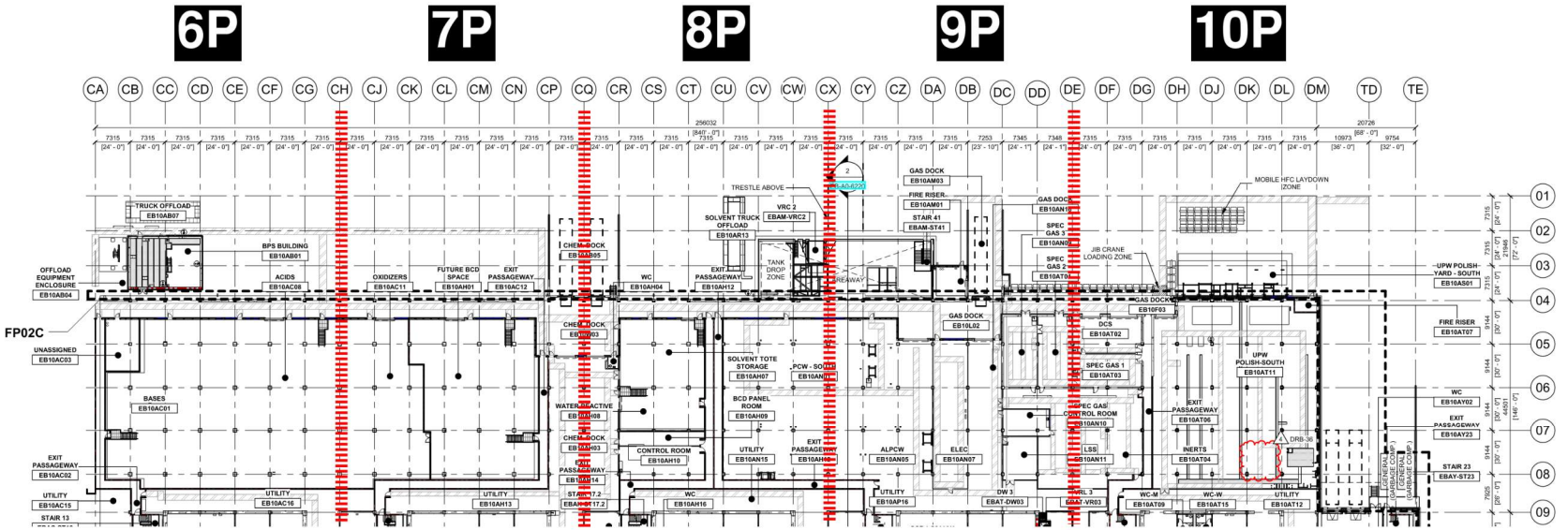
Utility Level
1YA

PSSS Roof
2SA



PSSS.2

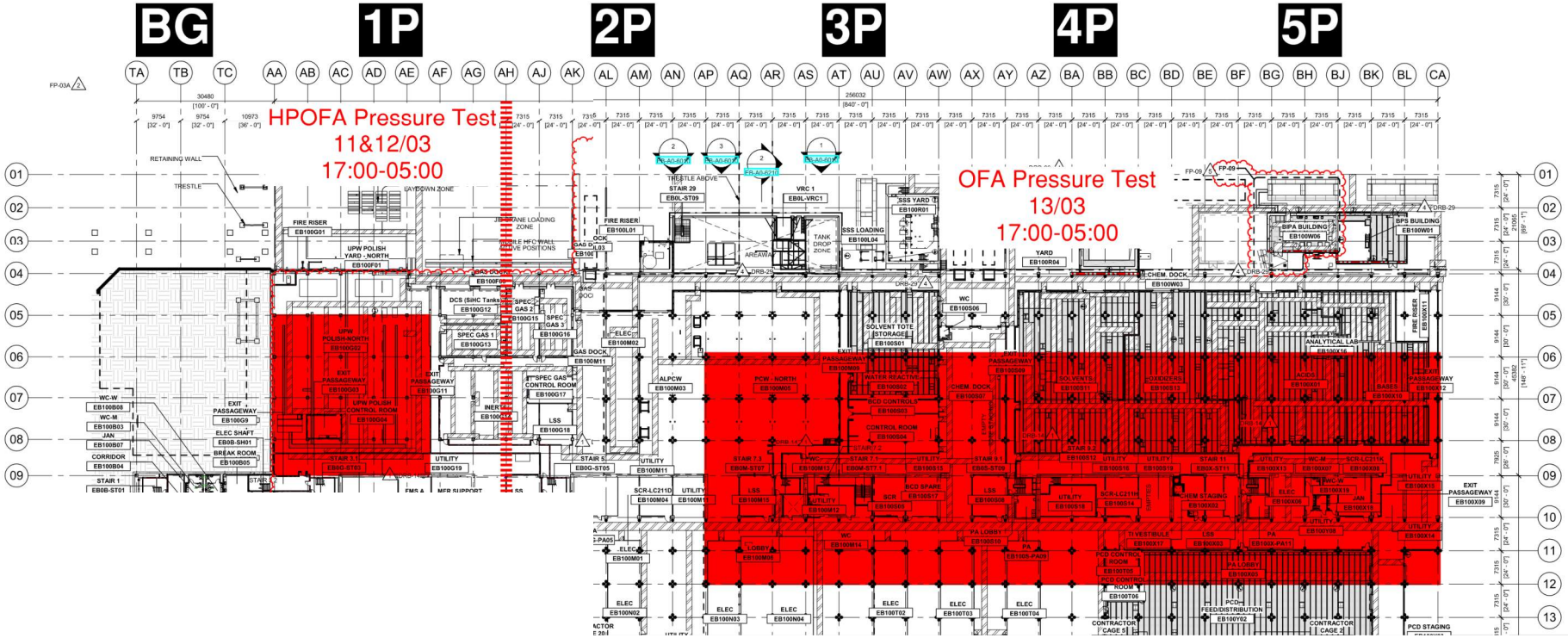
Utility Level
1YA



PSSS Roof
2SA

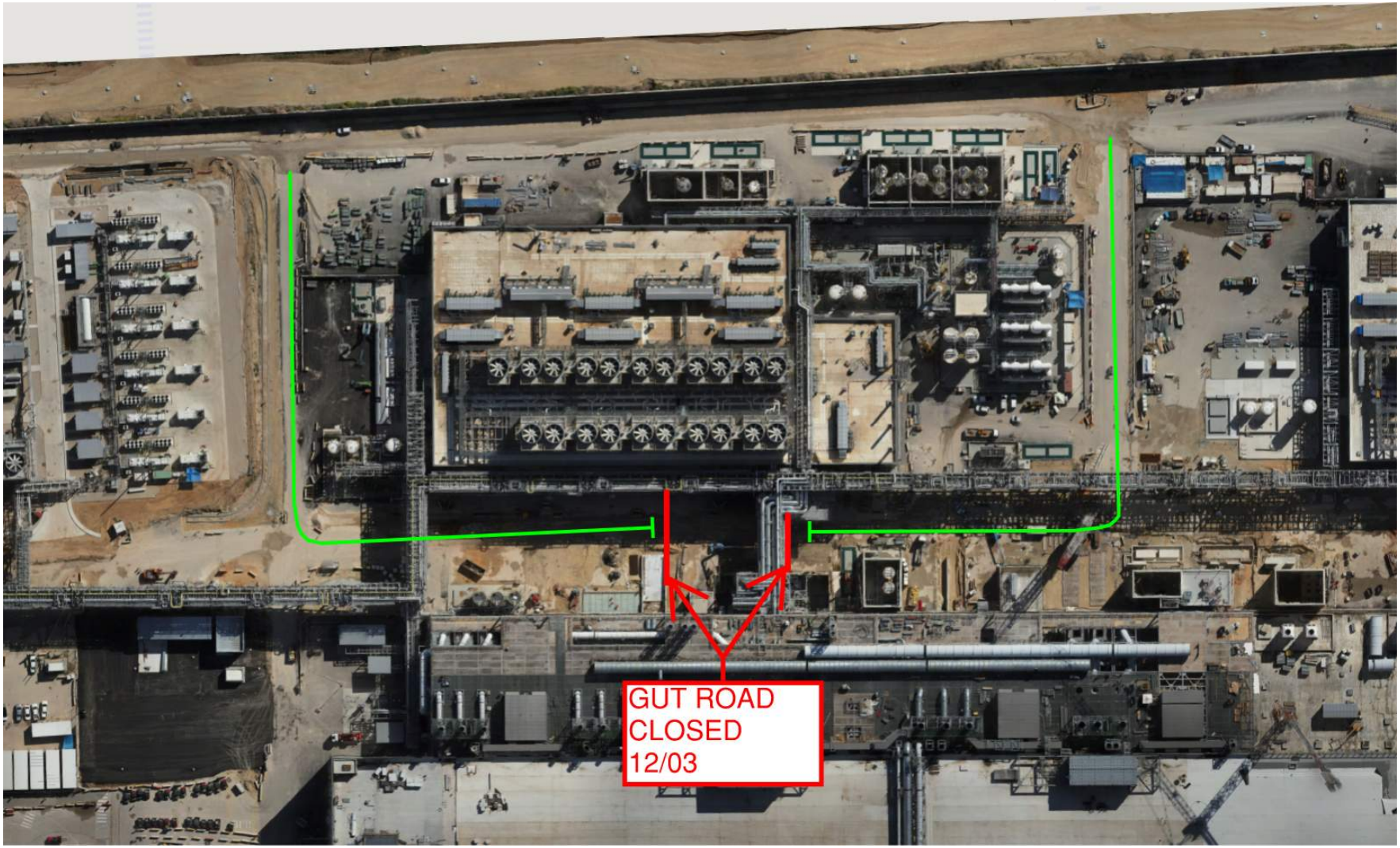
PSSS Pressure Testing

Utility Level
1YA



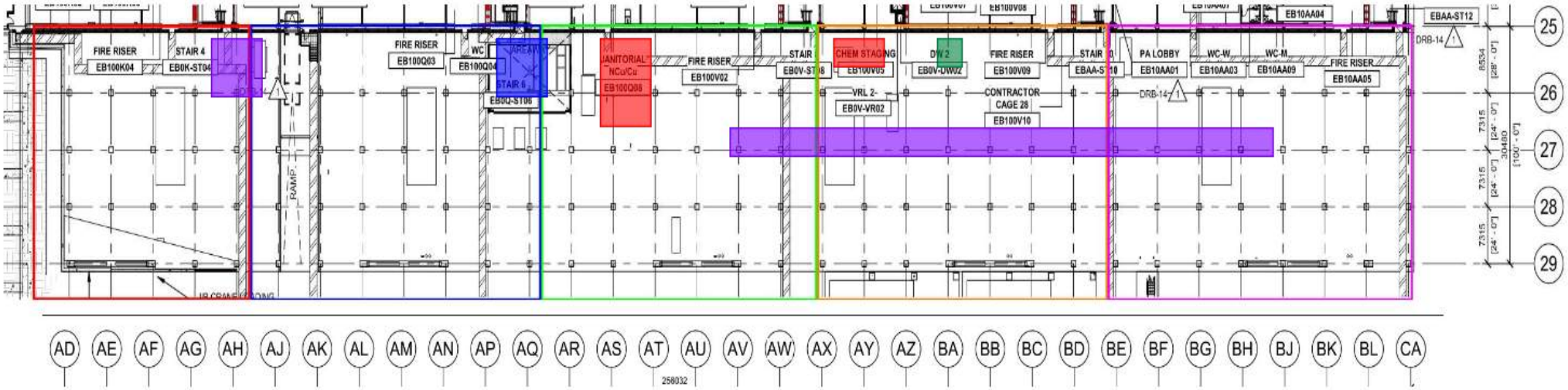
BGY Closed WW11 For UN2 Blowdown

GUT ROAD CLOSED 12/03



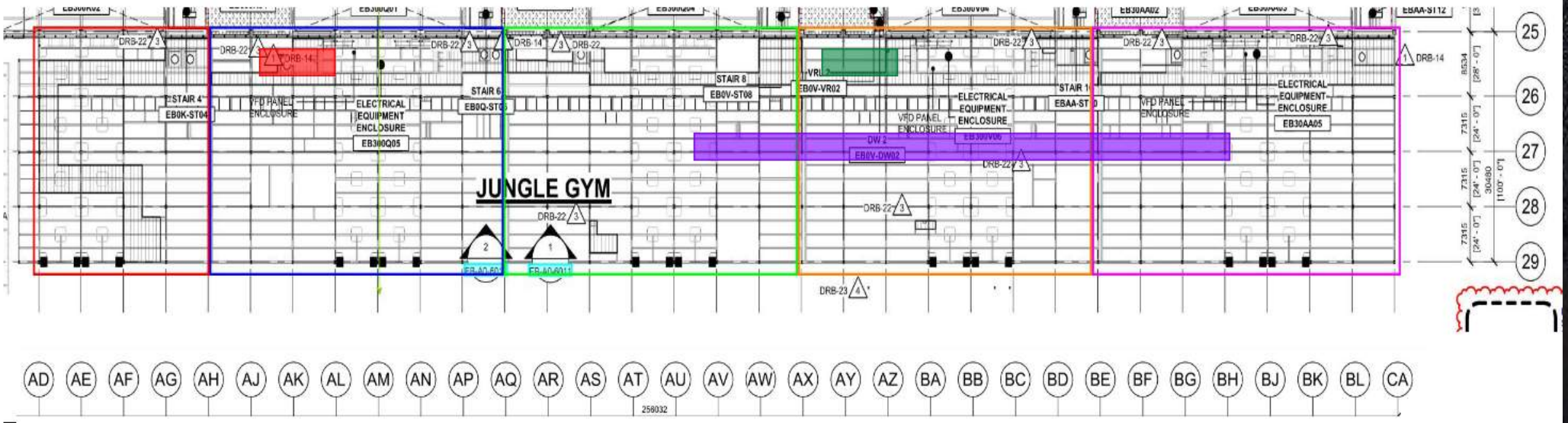
WJG – UL

* Carmel Bidud - installation of ducts from small AH to FAB	*Pach Taas - installation of modules in west SUT.	* Megason - working on LSS	* W&W - welding of shims for outriggers * MB - installation of FP pipes to lift 3	* Chemo - performing passivation on UPN 117



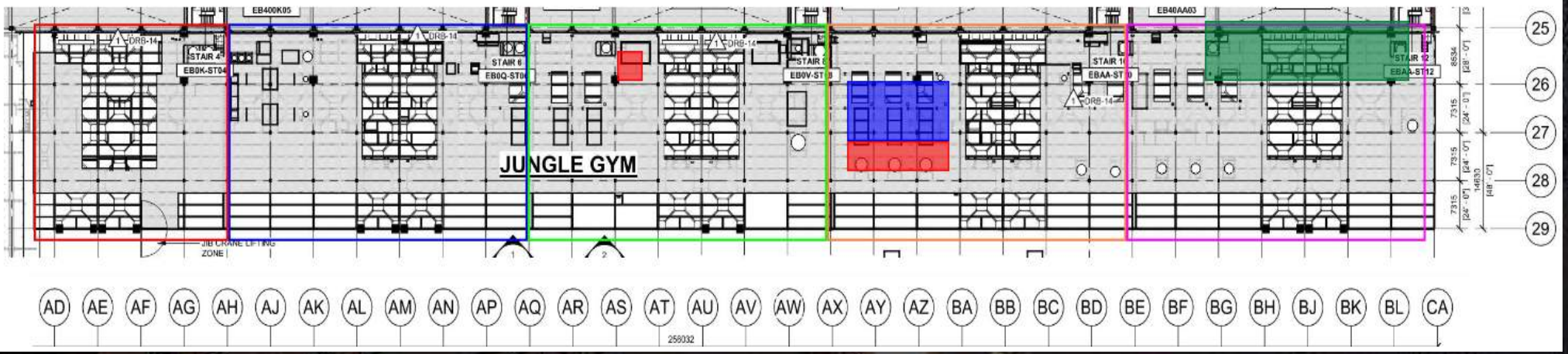
WJG – Lift 2

	* Chemo - connecting the Nalco skid for washing and preparing MARS pipes of 2J for preassure test		* 4J MAH scaffold was dismantled * Pach Taas -connection to single stack to exhaust fans	* Chemo - performing passivation on UPN 117



WJG – Lift 3

		* SN removing, cutting gratings and welding supports	* SN - cutting gratings and welding supports * Pach Taas - installing and fine tuning plates for fans	* Pach Taas - installing sleeves for 5J plenum



Crane logistics

RT 120 ton
located at AG-AH.

Crane: 750 ton crane
located at AV-AW.

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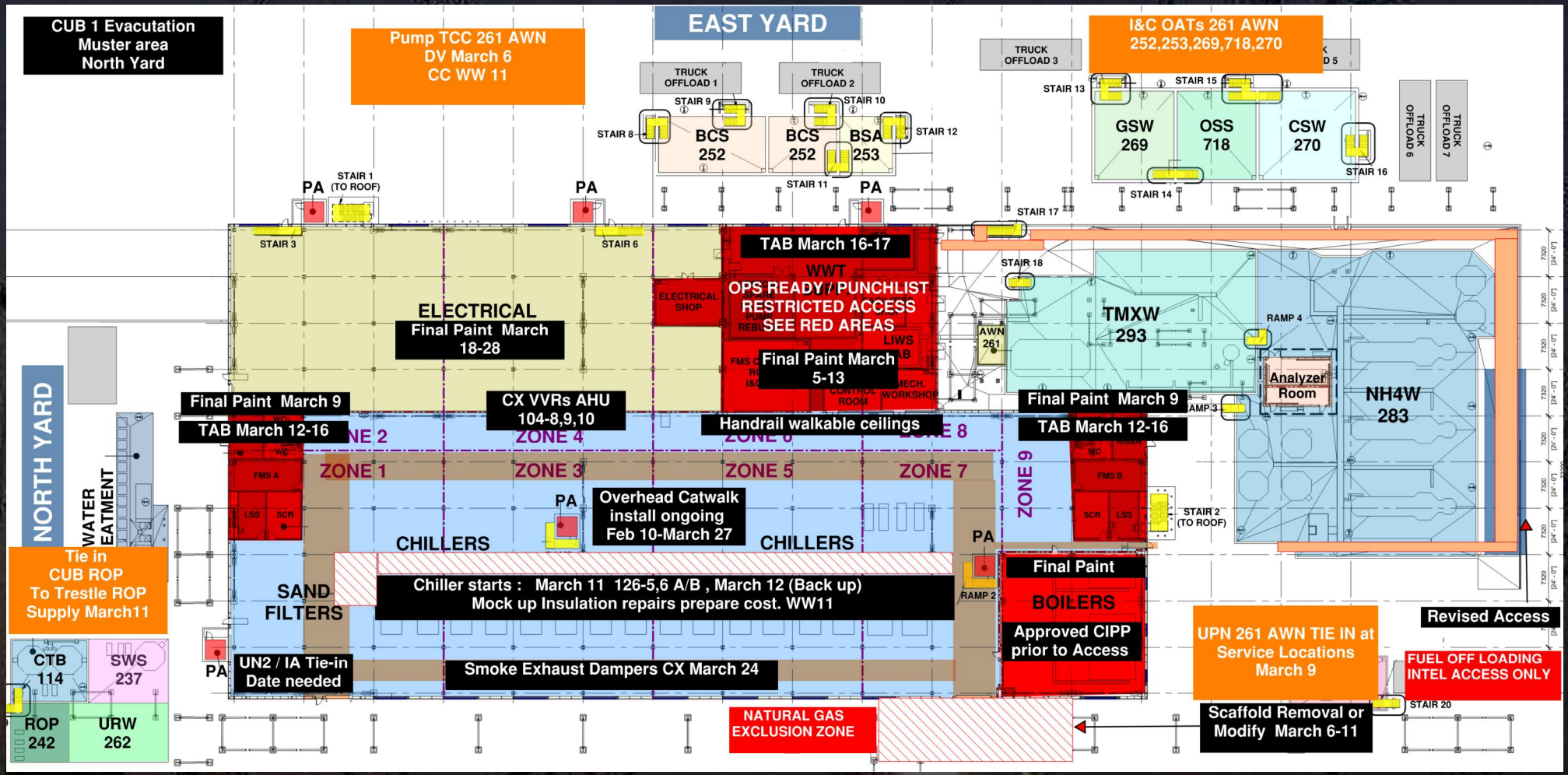
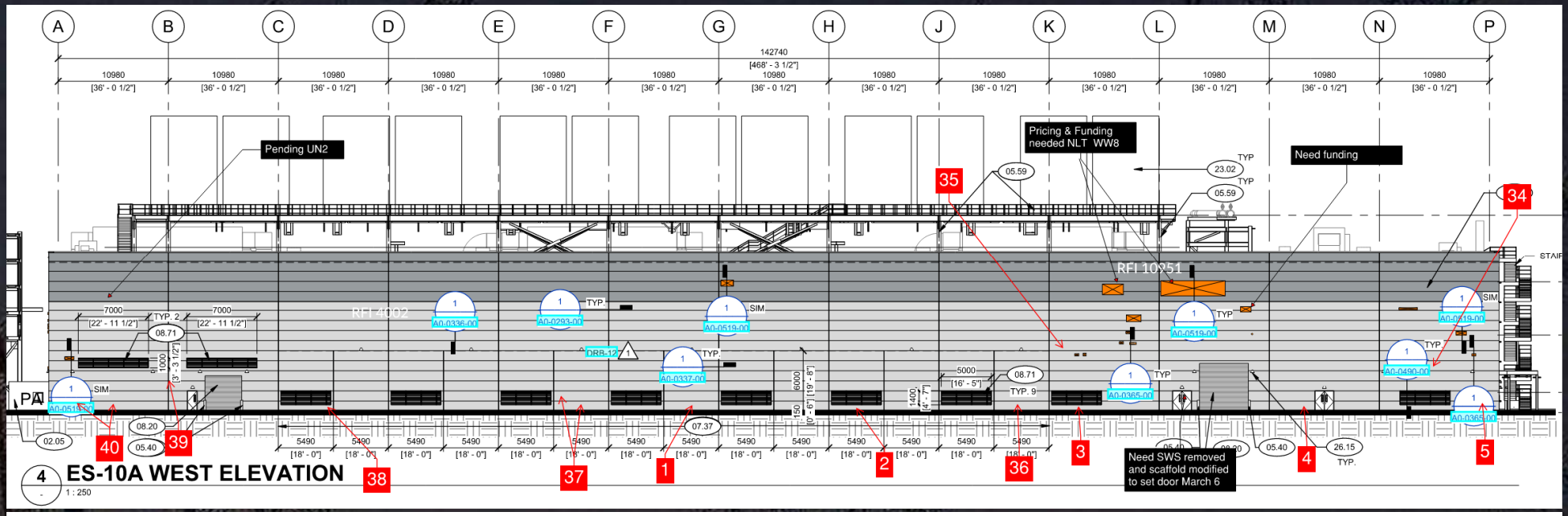
CUB 1



CUB 1 West Wall coordination /Trestle/Site



- Waste Systems Pressure Testing Wrap up 3d March 4-5
- Trestle Scaffold removal 5d March 6-11
- Metal flashings and Panel work Man Door 5-7d March 12-20
- Claim Envelope ready for DVs March 20
- DV acceptance list and corrections 7d April 2
- Ops Ready April 3
- Concrete removal Site Grading Form rebar pour concrete 5-7 d Schedule under review
- Bullards 2d April 1-2

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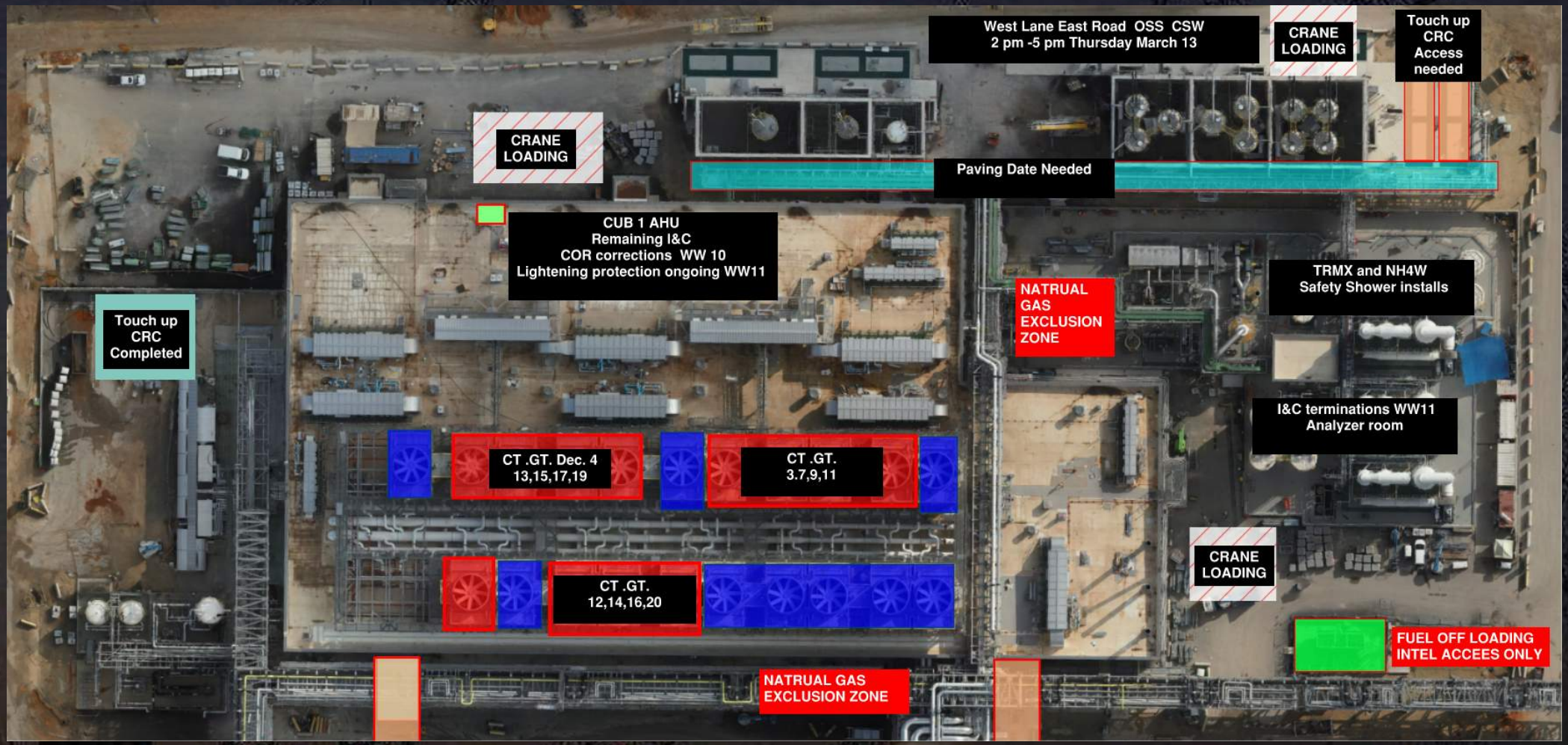
CUB 1 – EXTERIOR/ROOF



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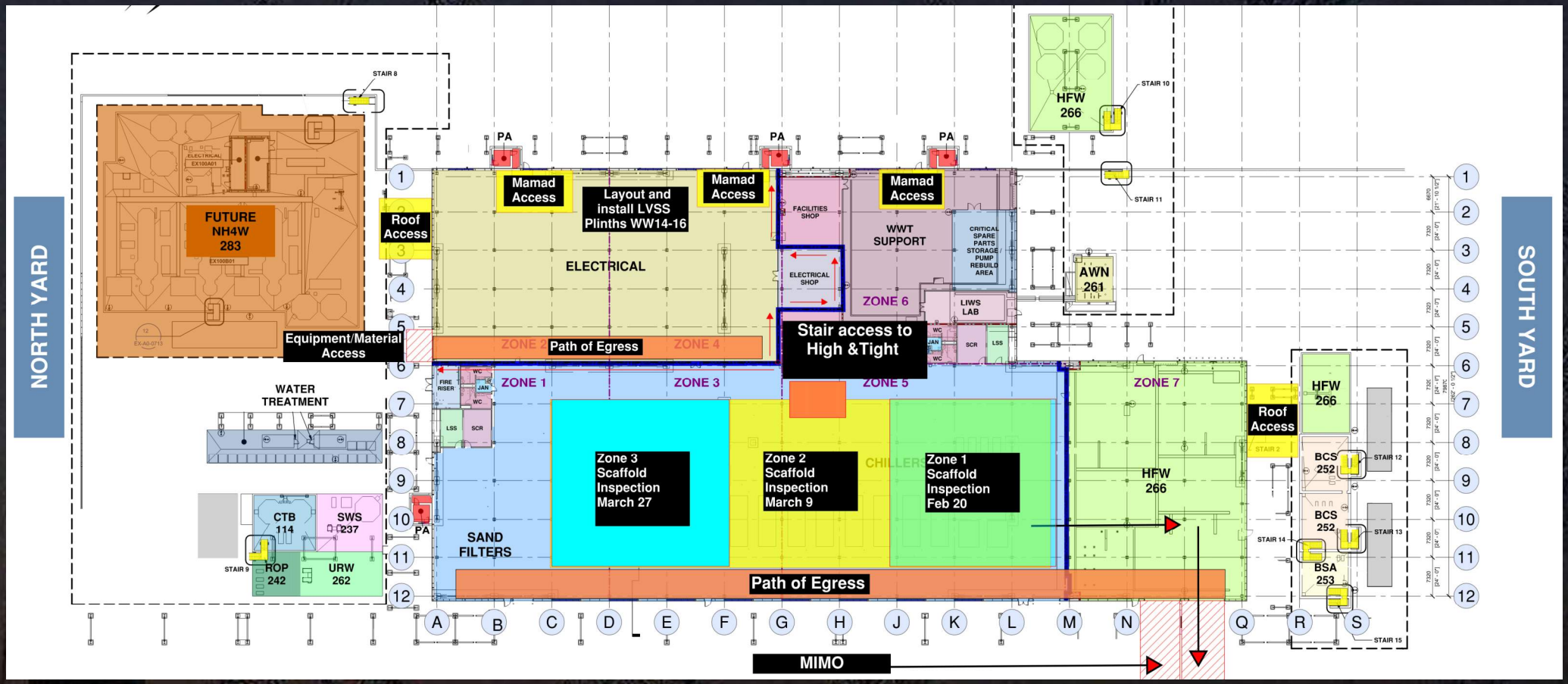
CUB 2- Load in ,H&T, Framing and Sheetrock



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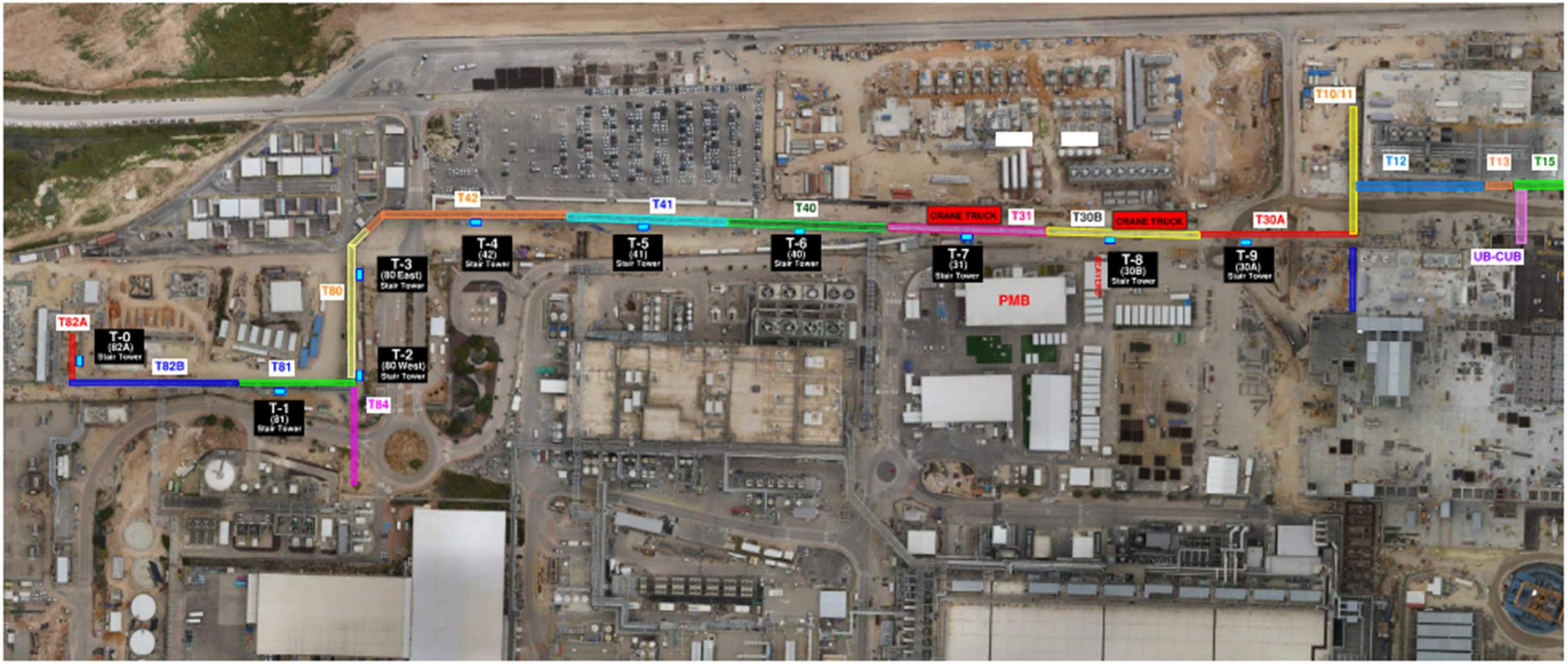
CUB 2 – EXTERIOR/ROOF


T10/11
T12
T13
T15
T42
T41
T40
CRANE TRUCK
T31
T30B
CRANE TRUCK
T30A
UB-CUB
T-4 (42) Stair Tower
T-5 (41) Stair Tower
T-6 (40) Stair Tower
T-7 (31) Stair Tower
T-8 (30B) Stair Tower
T-9 (30A) Stair Tower
T-3 (80 East) Stair Tower
T80
PMB
T82A
T-0 (82A) Stair Tower
T82B
T81
T-2 (80 West) Stair Tower
T84
T-1 (81) Stair Tower

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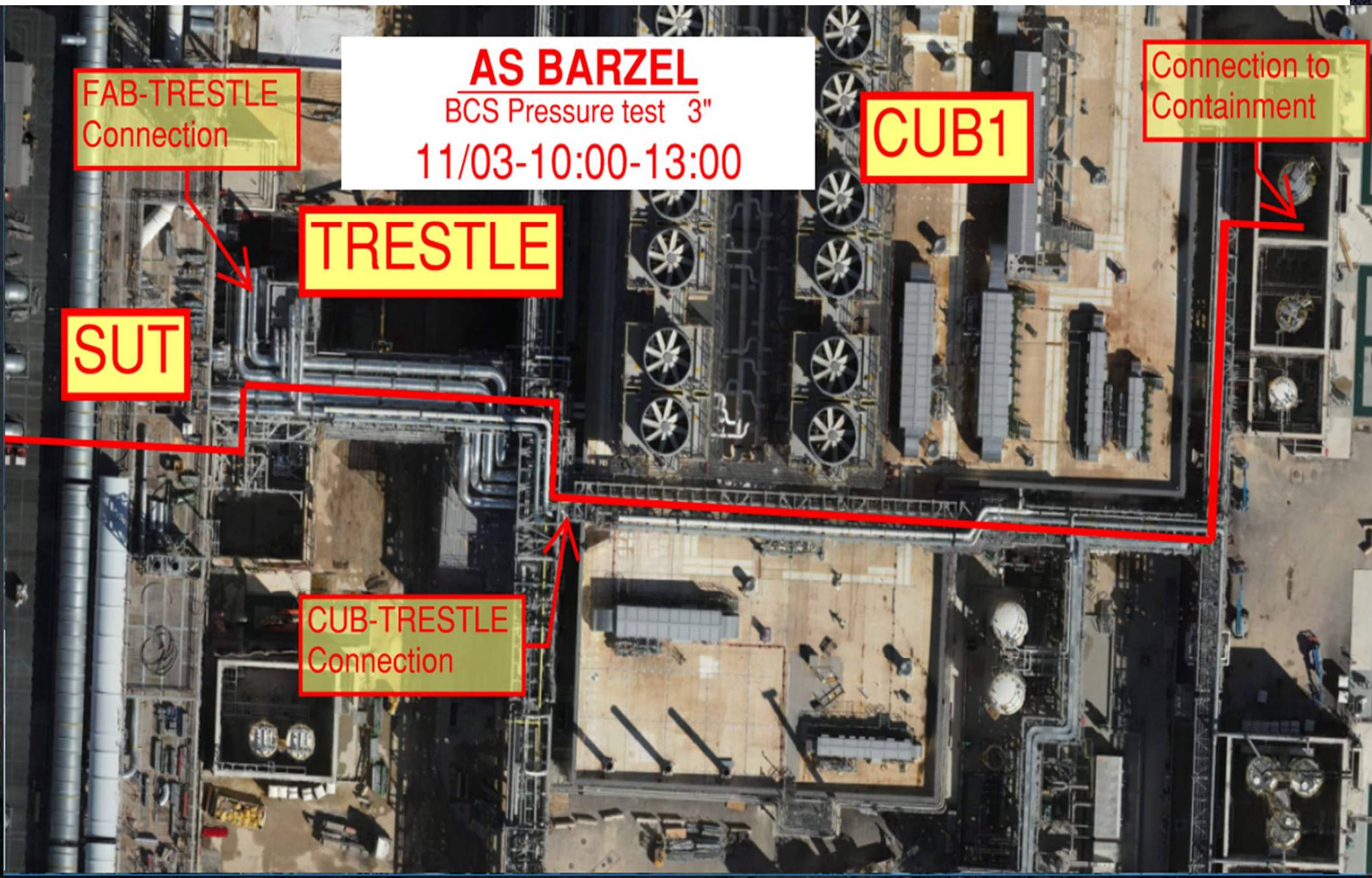

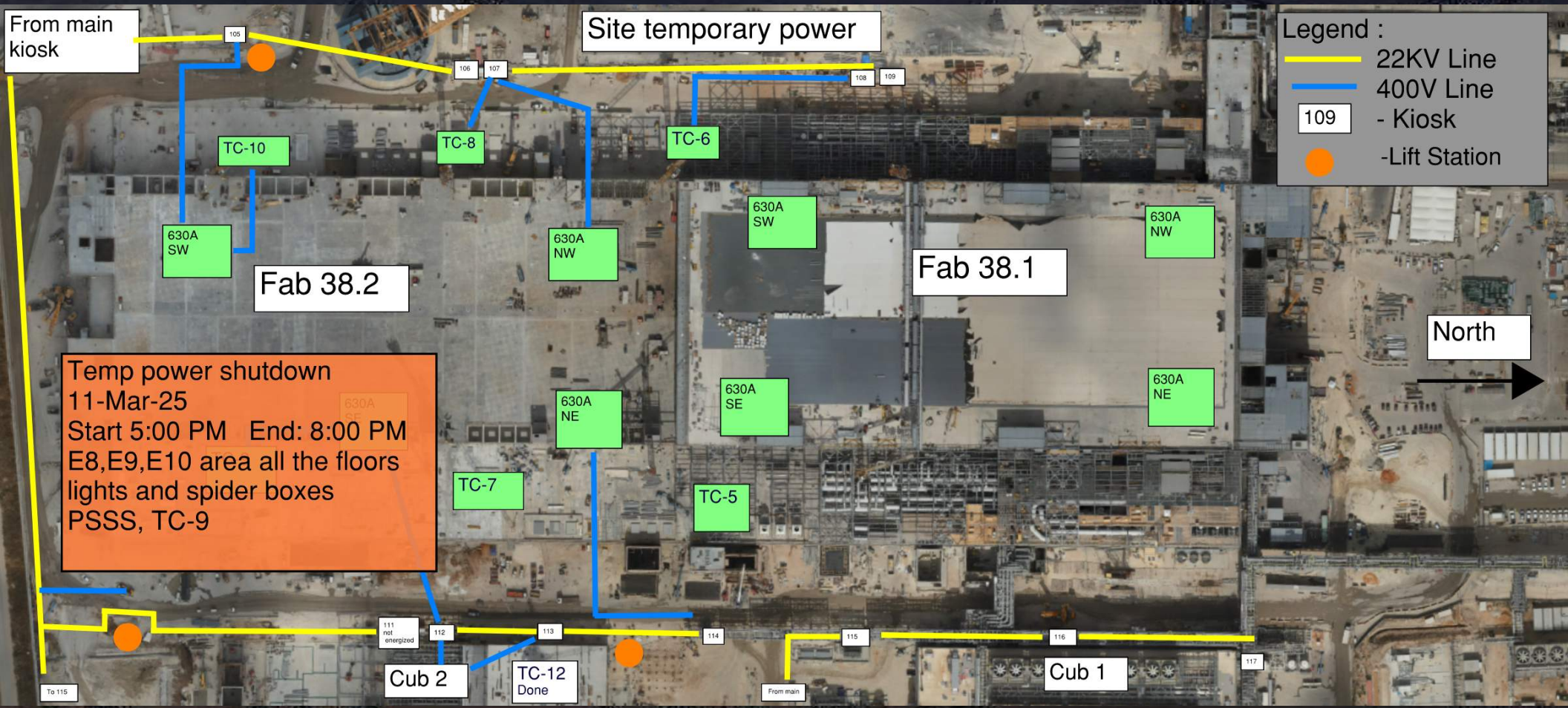
From main kiosk
105
Site temporary power
106
107
108
109
Legend :
22KV Line
400V Line
109
- Kiosk
-Lift Station
TC-10
TC-8
TC-6
630A SW
630A NW
Fab 38.2
630A SW
630A NW
Fab 38.1
North
Temp power shutdown
11-Mar-25
Start 5:00 PM End: 8:00 PM
E8,E9,E10 area all the floors
lights and spider boxes
PSSS, TC-9
630A NE
630A SE
630A NE
TC-7
TC-5
111 not energized
112
113
114
115
116
117
To 115
Cub 2
TC-12 Done
From main
Cub 1

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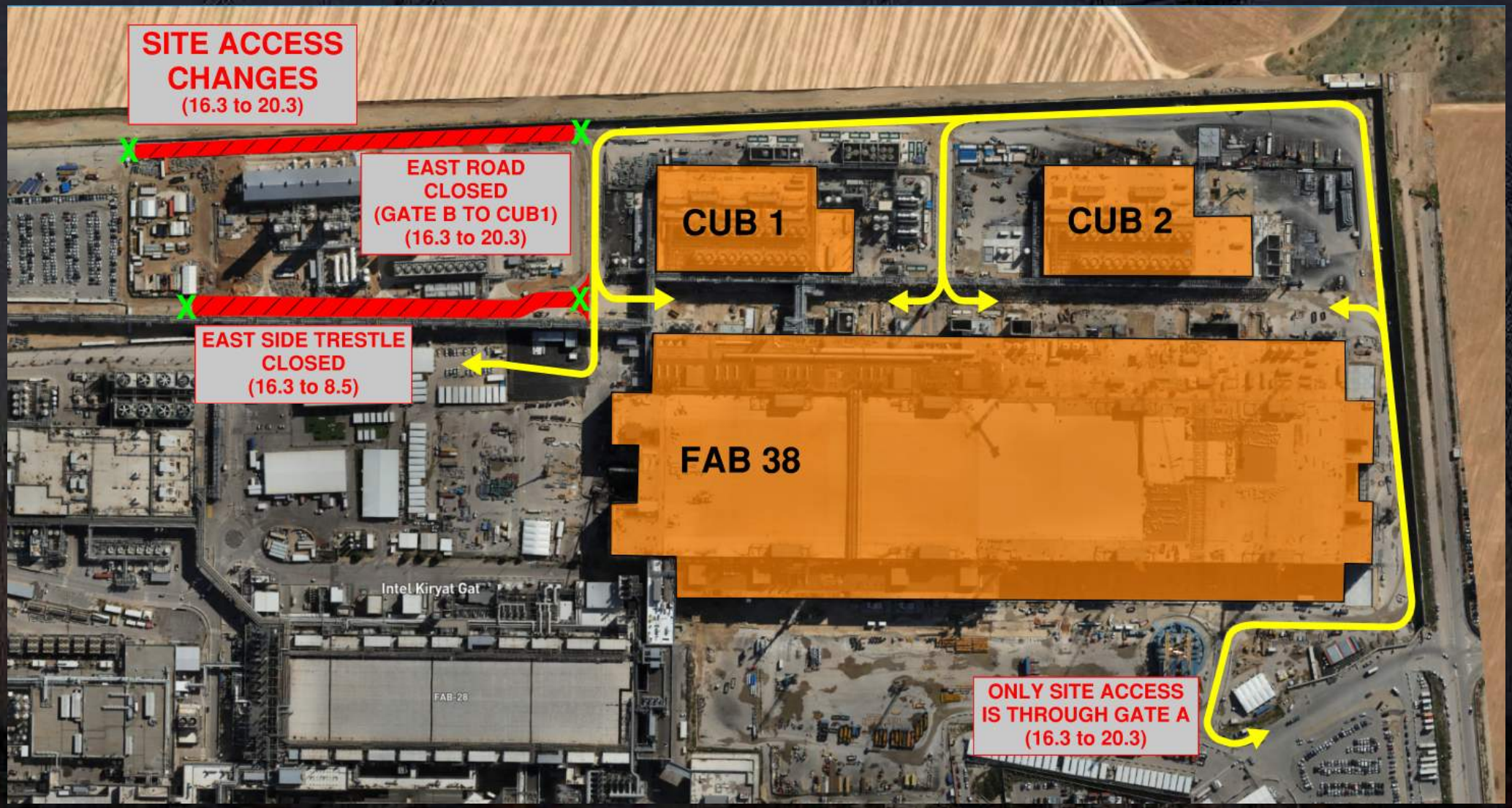
Daily Coordination Meeting

Site Logistics

North



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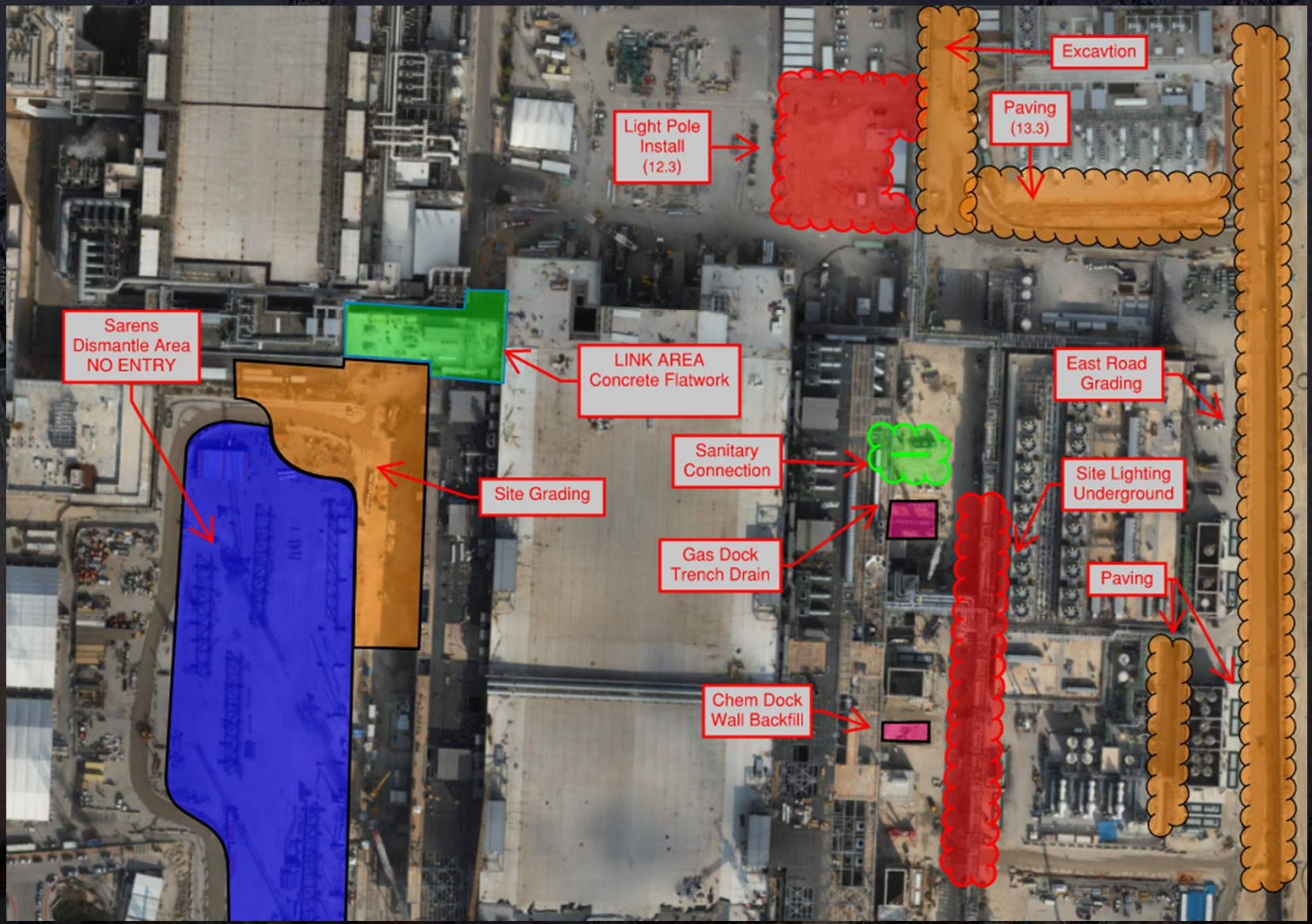
Daily Coordination Meeting

Site Logistics

North



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Daily Coordination Meeting

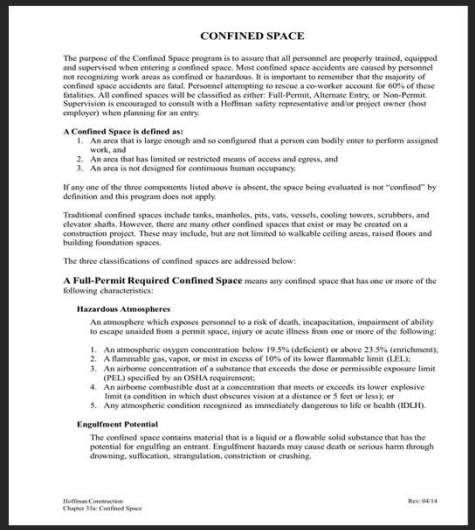
Site Logistics

South

HOFFMAN CONSTRUCTION COMPANY
OF ISRAEL

G-U-T-S GET US THERE SAFE

Confined Space



CONFINED SPACE

The purpose of the Confined Space program is to assure that all personnel are properly trained, equipped and supervised when entering a confined space. Most confined space accidents are caused by personnel not recognizing work areas as confined or hazardous. It is important to remember that the majority of confined space accidents are fatal. Personnel attempting to rescue a co-worker account for 60% of these fatalities. All confined spaces will be classified as either: Full-Permit, Alternate Entry, or Non-Permit. Supervision is encouraged to consult with a Hoffman safety representative and/or project owner (host employer) when planning for an entry.

A Confined Space is defined as:

1. An area that is large enough and so configured that a person can bodily enter to perform assigned work, and
2. An area that has limited or restricted means of access and egress, and
3. An area is not designed for continuous human occupancy.

If any one of the three components listed above is absent, the space being evaluated is not "confined" by definition and this program does not apply.

Traditional confined spaces include tanks, manholes, pits, vats, vessels, cooling towers, scrubbers, and elevator shafts. However, there are many other confined spaces that exist or may be created on a construction project. These may include, but are not limited to walkable ceiling areas, raised floors and building foundation spaces.

The three classifications of confined spaces are addressed below:

A Full-Permit Required Confined Space means any confined space that has one or more of the following characteristics:

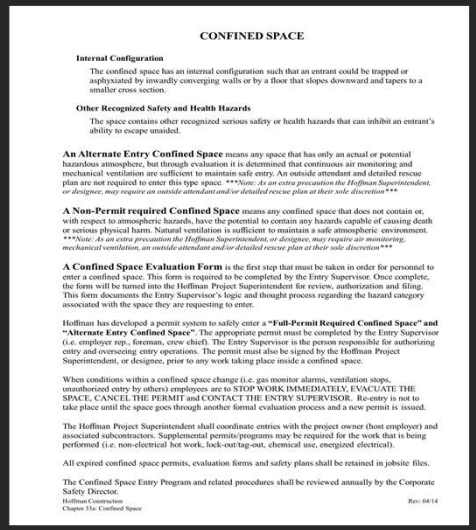
Hazardous Atmospheres

An atmosphere which exposes personnel to a risk of death, incapacitation, impairment of ability to escape unaided from a permit space, injury or acute illness from one or more of the following:

1. An atmospheric oxygen concentration below 19.5% (deficient) or above 23.5% (enrichment);
2. A flammable gas, vapor, or mist in excess of 10% of its lower flammable limit (LEL);
3. An airborne concentration of a substance that exceeds the dose or permissible exposure limit (PEL) specified by an OSHA requirement;
4. An airborne combustible dust at a concentration that meets or exceeds its lower explosive limit (a condition in which dust obscures vision at a distance or 5 feet or less); or
5. Any atmospheric condition recognized as immediately dangerous to life or health (IDLH).

Engulfment Potential

The confined space contains material that is a liquid or a flowable solid substance that has the potential for engulfing an entrant. Engulfment hazards may cause death or serious harm through drowning, suffocation, strangulation, constriction or crushing.



CONFINED SPACE

Internal Configuration

The confined space has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor that slopes downward and tapers to a smaller cross section.

Other Recognized Safety and Health Hazards

The space contains other recognized serious safety or health hazards that can inhibit an entrant's ability to escape unaided.

An Alternate Entry Confined Space means any space that has only an actual or potential hazardous atmosphere, but through evaluation it is determined that continuous air monitoring and mechanical ventilation are sufficient to maintain safe entry. An outside attendant and detailed rescue plan are not required to enter this type space. ***Note: As an extra precaution the Hoffman Superintendent, or designee, may require an outside attendant and/or detailed rescue plan at their sole discretion***

A Non-Permit required Confined Space means any confined space that does not contain or, with respect to atmospheric hazards, have the potential to contain any hazards capable of causing death or serious physical harm. Natural ventilation is sufficient to maintain a safe atmospheric environment. ***Note: As an extra precaution the Hoffman Superintendent, or designee, may require air monitoring, mechanical ventilation, an outside attendant and/or detailed rescue plan at their sole discretion***

A Confined Space Evaluation Form is the first step that must be taken in order for personnel to enter a confined space. This form is required to be completed by the Entry Supervisor. Once complete, the form will be turned into the Hoffman Project Superintendent for review, authorization and filing. This form documents the Entry Supervisor's logic and thought process regarding the hazard category associated with the space they are requesting to enter.

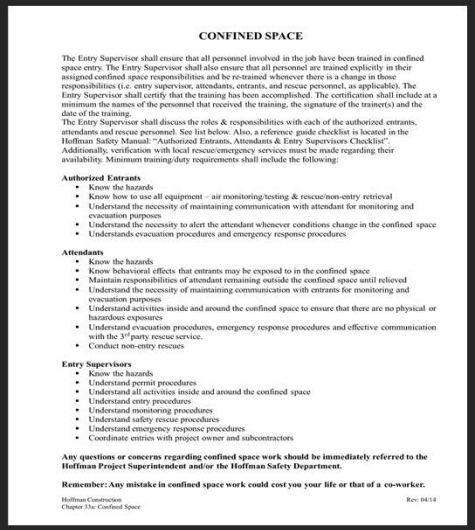
Hoffman has developed a permit system to safely enter a **"Full-Permit Required Confined Space" and "Alternate Entry Confined Space"**. The appropriate permit must be completed by the Entry Supervisor (i.e. employer rep., foreman, crew chief). The Entry Supervisor is the person responsible for authorizing entry and overseeing entry operations. The permit must also be signed by the Hoffman Project Superintendent, or designee, prior to any work taking place inside a confined space.

When conditions within a confined space change (i.e. gas monitor alarms, ventilation stops, unauthorized entry by workers) employees are to STOP WORK IMMEDIATELY, EVACUATE THE SPACE, CANCEL THE PERMIT and CONTACT THE ENTRY SUPERVISOR. Re-entry is not to take place until the space goes through another formal evaluation process and a new permit is issued.

The Hoffman Project Superintendent shall coordinate entries with the project owner (host employer) and associated subcontractors. Supplemental permits/programs may be required for the work that is being performed (i.e. non-electrical hot work, lock-out/tag-out, chemical use, energized electrical).

All expired confined space permits, evaluation forms and safety plans shall be retained in jobsite files.

The Confined Space Entry Program and related procedures shall be reviewed annually by the Corporate Safety Director.



CONFINED SPACE

The Entry Supervisor shall ensure that all personnel involved in the job have been trained in confined space entry. The Entry Supervisor shall also ensure that all personnel are trained explicitly in their assigned confined space responsibilities and be re-trained whenever there is a change in those responsibilities (i.e. entry supervisor, attendants, entrants, and rescue personnel, as applicable). The Entry Supervisor shall certify that the training has been accomplished. The certification shall include at a minimum the names of the personnel that received the training, the signature of the trainer(s) and the date of the training.
The Entry Supervisor shall discuss the roles & responsibilities with each of the authorized entrants, attendants and rescue personnel. See list below. Also, a reference guide checklist is located in the Hoffman Safety Manual: "Authorized Entrants, Attendants & Entry Supervisors Checklist". Additionally, verification with local rescue/emergency services must be made regarding their availability. Minimum training/duty requirements shall include the following:

Authorized Entrants

- Know the hazards
- Know how to use all equipment – air monitoring/testing & rescue/non-entry retrieval
- Understand the necessity of maintaining communication with attendant for monitoring and evacuation purposes
- Understand the necessity to alert the attendant whenever conditions change in the confined space
- Understands evacuation procedures and emergency response procedures

Attendants

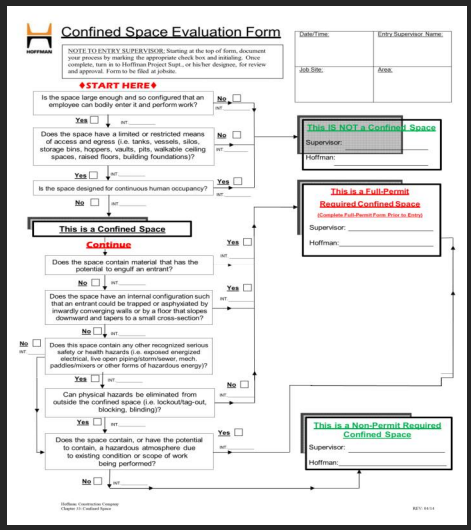
- Know the hazards
- Know behavioral effects that entrants may be exposed to in the confined space
- Maintain responsibilities of attendant remaining outside the confined space until relieved
- Understand the necessity of maintaining communication with entrants for monitoring and evacuation purposes
- Understand activities inside and around the confined space to ensure that there are no physical or hazardous exposures
- Understand evacuation procedures, emergency response procedures and effective communication with the 3rd party rescue service.
- Conduct non-entry rescues

Entry Supervisors

- Know the hazards
- Understand permit procedures
- Understand all activities inside and around the confined space
- Understand entry procedures
- Understand monitoring procedures
- Understand safety rescue procedures
- Understand emergency response procedures
- Coordinate entries with project owner and subcontractors

Any questions or concerns regarding confined space work should be immediately referred to the Hoffman Project Superintendent and/or the Hoffman Safety Department.

Remember: Any mistake in confined space work could cost you your life or that of a co-worker.



Confined Space Evaluation Form

NOTE TO ENTRY SUPERVISOR: Starting at the top of form, document your process by marking the appropriate check box and initialing. Once complete, turn in to Hoffman Project Supt., or his/her designee, for review and approval. Form to be filed at jobsite.

Date/Time: | Entry Supervisor: Name:
Job Site: | Area:

♦START HERE♦

Is the space large enough and so configured that an employee can bodily enter it and perform work? — No → This is NOT a Confined Space (Supervisor: / Hoffman:)

Yes → Does the space have a limited or restricted means of access and egress (i.e. tanks, vessels, silos, storage bins, hoppers, vaults, pits, walkable ceiling spaces, raised floors, building foundations)? — No → This is NOT a Confined Space (Supervisor: / Hoffman:)

Yes → Is the space designed for continuous human occupancy? — Yes → This is a Full-Permit Required Confined Space (Complete Full-Permit Form Prior to Entry) (Supervisor: / Hoffman:)

No → This is a Confined Space

Continue

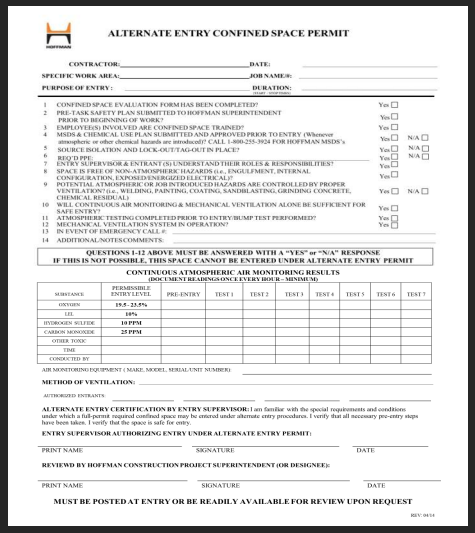
Does the space contain material that has the potential to engulf an entrant? — No

Yes → Does the space have an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor that slopes downward and tapers to a small cross-section? — No

Yes → Does this space contain any other recognized serious safety or health hazards (i.e. exposed energized electrical, live open piping/storm/sewer, mech. paddles/mixers or other forms of hazardous energy)? — No

Yes → Can physical hazards be eliminated from outside the confined space (i.e. lockout/tag-out, blocking, blinding)? — No

Yes → Does the space contain, or have the potential to contain, a hazardous atmosphere due to existing condition or scope of work being performed? — No → This is a Non-Permit Required Confined Space (Supervisor: / Hoffman:)



ALTERNATE ENTRY CONFINED SPACE PERMIT

CONTRACTOR:_____DATE:
SPECIFIC WORK AREA:_____JOB NAME/#:
PURPOSE OF ENTRY:_____DURATION: (TIME ENTERED - TIME EXITED)

1	CONFINED SPACE EVALUATION FORM HAS BEEN COMPLETED?	Yes ☐	
2	PRE-TASK SAFETY PLAN SUBMITTED TO HOFFMAN SUPERINTENDENT PRIOR TO BEGINNING OF WORK?	Yes ☐	
3	EMPLOYEE(S) INVOLVED ARE CONFINED SPACE TRAINED?	Yes ☐	
4	MSDS & CHEMICAL USE PLAN SUBMITTED AND APPROVED PRIOR TO ENTRY (Whenever atmospheric or other chemical hazards are introduced)? CALL 1-800-255-3924 FOR HOFFMAN MSDS's	Yes ☐	N/A ☐
5	SOURCE ISOLATION AND LOCK-OUT/TAG-OUT IN PLACE?	Yes ☐	N/A ☐
6	REQ'D PPE:	Yes ☐	N/A ☐
7	ENTRY SUPERVISOR & ENTRANT (S) UNDERSTAND THEIR ROLES & RESPONSIBILITIES?	Yes ☐	
8	SPACE IS FREE OF NON-ATMOSPHERIC HAZARDS (i.e., ENGULFMENT, INTERNAL CONFIGURATION, EXPOSED/ENERGIZED ELECTRICAL)?	Yes ☐	
9	POTENTIAL ATMOSPHERIC OR JOB INTRODUCED HAZARDS ARE CONTROLLED BY PROPER VENTILATION (i.e., WELDING, PAINTING, COATING, SANDBLASTING, GRINDING CONCRETE, CHEMICAL RESIDUAL)?	Yes ☐	N/A ☐
10	WERE CONTINUOUS AIR MONITORING & MECHANICAL VENTILATION ALONE BE SUFFICIENT FOR SAFE ENTRY?	Yes ☐	
11	ATMOSPHERIC TESTING COMPLETED PRIOR TO ENTRY/BUMP TEST PERFORMED?	Yes ☐	
12	MECHANICAL VENTILATION SYSTEM IN OPERATION?	Yes ☐	
13	IN EVENT OF EMERGENCY CALL #:		
14	ADDITIONAL NOTES/COMMENTS:		

QUESTIONS 1-12 ABOVE MUST BE ANSWERED WITH A "YES" or "N/A" RESPONSE
IF THIS IS NOT POSSIBLE, THIS SPACE CANNOT BE ENTERED UNDER ALTERNATE ENTRY PERMIT

CONTINUOUS ATMOSPHERIC AIR MONITORING RESULTS
(DOCUMENT READINGS ONCE EVERY HOUR - MINIMUM)

SUBSTANCE	PERMISSIBLE ENTRY LEVEL	PRE-ENTRY	TEST 1	TEST 2	TEST 3	TEST 4	TEST 5	TEST 6	TEST 7
OXYGEN	19.5 - 23.5%								
LEL	10%								
HYDROGEN SULFIDE	10 PPM								
CARBON MONOXIDE	25 PPM								
OTHER TOXIC									
TIME									
CONDUCTED BY									

AIR MONITORING EQUIPMENT (MAKE, MODEL, SERIAL/UNIT NUMBER):
METHOD OF VENTILATION:
AUTHORIZED ENTRANTS:

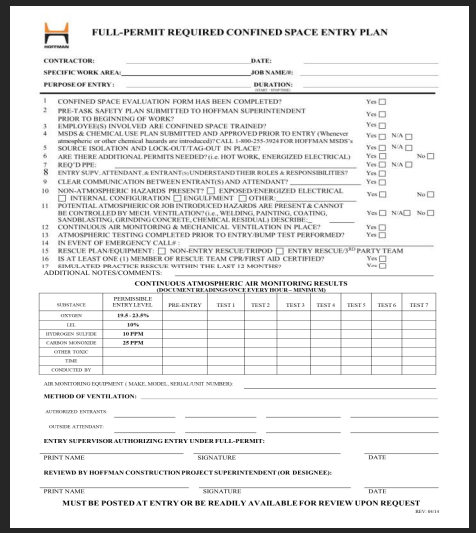
ALTERNATE ENTRY CERTIFICATION BY ENTRY SUPERVISOR: I am familiar with the special requirements and conditions under which a full-permit required confined space may be entered under alternate entry procedures. I verify that all necessary pre-entry steps have been taken. I verify that the space is safe for entry.

ENTRY SUPERVISOR AUTHORIZING ENTRY UNDER ALTERNATE ENTRY PERMIT:
PRINT NAME SIGNATURE DATE

REVIEWD BY HOFFMAN CONSTRUCTION PROJECT SUPERINTENDENT (OR DESIGNEE):
PRINT NAME SIGNATURE DATE

MUST BE POSTED AT ENTRY OR BE READILY AVAILABLE FOR REVIEW UPON REQUEST

REV: 04/14



FULL-PERMIT REQUIRED CONFINED SPACE ENTRY PLAN

CONTRACTOR:_____DATE:
SPECIFIC WORK AREA:_____JOB NAME/#:
PURPOSE OF ENTRY:_____DURATION: (TIME ENTERED - TIME EXITED)

1	CONFINED SPACE EVALUATION FORM HAS BEEN COMPLETED?	Yes ☐	
2	PRE-TASK SAFETY PLAN SUBMITTED TO HOFFMAN SUPERINTENDENT PRIOR TO BEGINNING OF WORK?	Yes ☐	
3	EMPLOYEE(S) INVOLVED ARE CONFINED SPACE TRAINED?	Yes ☐	
4	MSDS & CHEMICAL USE PLAN SUBMITTED AND APPROVED PRIOR TO ENTRY (Whenever atmospheric or other chemical hazards are introduced)? CALL 1-800-255-3924 FOR HOFFMAN MSDS's	Yes ☐	N/A ☐
5	SOURCE ISOLATION AND LOCK-OUT/TAG-OUT IN PLACE?	Yes ☐	N/A ☐
6	ARE THERE ADDITIONAL PERMITS NEEDED? (i.e. HOT WORK, ENERGIZED ELECTRICAL)	Yes ☐	No ☐
7	REQ'D PPE:	Yes ☐	N/A ☐
8	ENTRY SUPV. ATTENDANT & ENTRANTS UNDERSTAND THEIR ROLES & RESPONSIBILITIES?	Yes ☐	
9	CLEAR COMMUNICATION BETWEEN ENTRANT(S) AND ATTENDANT?	Yes ☐	
10	NON-ATMOSPHERIC HAZARDS PRESENT? ☐ EXPOSED/ENERGIZED ELECTRICAL ☐ INTERNAL CONFIGURATION ☐ ENGULFMENT ☐ OTHER:	Yes ☐	No ☐
11	POTENTIAL ATMOSPHERIC OR JOB INTRODUCED HAZARDS ARE PRESENT & CANNOT BE CONTROLLED BY MECH. VENTILATION? (i.e., WELDING, PAINTING, COATING, SANDBLASTING, GRINDING CONCRETE, CHEMICAL RESIDUAL) DESCRIBE:_____	Yes ☐	N/A ☐ No ☐
12	CONTINUOUS AIR MONITORING & MECHANICAL VENTILATION IN PLACE?	Yes ☐	
13	ATMOSPHERIC TESTING COMPLETED PRIOR TO ENTRY/BUMP TEST PERFORMED?	Yes ☐	
14	IN EVENT OF EMERGENCY CALL# :		
15	RESCUE PLAN/EQUIPMENT: ☐ NON-ENTRY RESCUE/TRIPOD ☐ ENTRY RESCUE/3RD PARTY TEAM		
16	IS AT LEAST ONE (1) MEMBER OF RESCUE TEAM CPR/FIRST AID CERTIFIED?	Yes ☐	
17	SIMULATED PRACTICE RESCUE WITHIN THE LAST 12 MONTHS?	Yes ☐	
	ADDITIONAL NOTES/COMMENTS:		

CONTINUOUS ATMOSPHERIC AIR MONITORING RESULTS
(DOCUMENT READINGS ONCE EVERY HOUR - MINIMUM)

SUBSTANCE	PERMISSIBLE ENTRY LEVEL	PRE-ENTRY	TEST 1	TEST 2	TEST 3	TEST 4	TEST 5	TEST 6	TEST 7
OXYGEN	19.5 - 23.5%								
LEL	10%								
HYDROGEN SULFIDE	10 PPM								
CARBON MONOXIDE	25 PPM								
OTHER TOXIC									
TIME									
CONDUCTED BY									

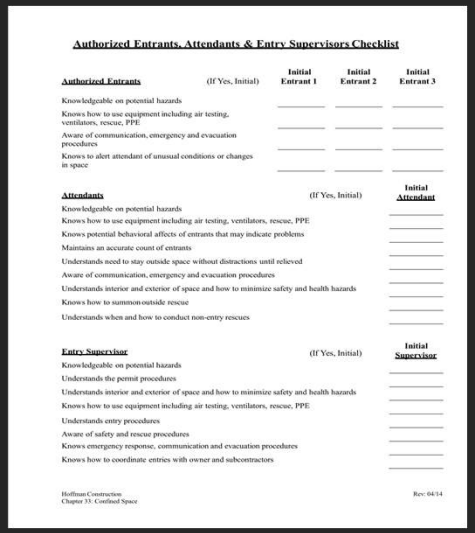
AIR MONITORING EQUIPMENT (MAKE, MODEL, SERIAL/UNIT NUMBER):
METHOD OF VENTILATION:
AUTHORIZED ENTRANTS:
OUTSIDE ATTENDANT:

ENTRY SUPERVISOR AUTHORIZING ENTRY UNDER FULL-PERMIT:
PRINT NAME SIGNATURE DATE

REVIEWD BY HOFFMAN CONSTRUCTION PROJECT SUPERINTENDENT (OR DESIGNEE):
PRINT NAME SIGNATURE DATE

MUST BE POSTED AT ENTRY OR BE READILY AVAILABLE FOR REVIEW UPON REQUEST

REV: 04/14



Authorized Entrants, Attendants & Entry Supervisors Checklist

Authorized Entrants	(If Yes, Initial)	Initial Entrant 1	Initial Entrant 2	Initial Entrant 3
Knowledgeable on potential hazards				
Knows how to use equipment including air testing, ventilators, rescue, PPE				
Aware of communication, emergency and evacuation procedures				
Knows to alert attendant of unusual conditions or changes in space				

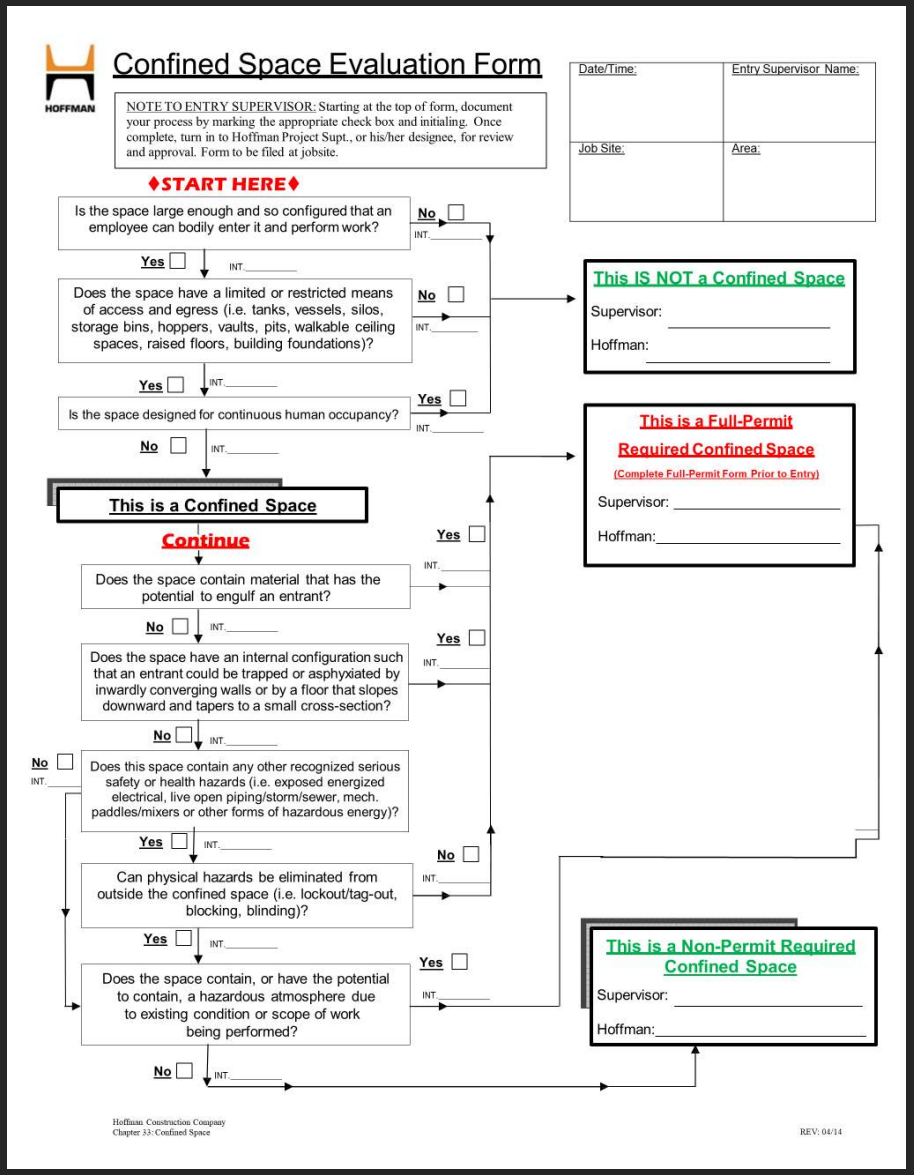
Attendants	(If Yes, Initial)	Initial Attendant
Knowledgeable on potential hazards		
Knows how to use equipment including air testing, ventilators, rescue, PPE		
Knows potential behavioral affects of entrants that may indicate problems		
Maintains an accurate count of entrants		
Understands need to stay outside space without distractions until relieved		
Aware of communication, emergency and evacuation procedures		
Understands interior and exterior of space and how to minimize safety and health hazards		
Knows how to summon outside rescue		
Understands when and how to conduct non-entry rescues		

Entry Supervisor	(If Yes, Initial)	Initial Supervisor
Knowledgeable on potential hazards		
Understands the permit procedures		
Understands interior and exterior of space and how to minimize safety and health hazards		
Knows how to use equipment including air testing, ventilators, rescue, PPE		
Understands entry procedures		
Aware of safety and rescue procedures		
Knows emergency response, communication and evacuation procedures		
Knows how to coordinate entries with owner and subcontractors		

HOFFMAN CONSTRUCTION COMPANY
OF ISRAEL

G-U-T-S GET US THERE SAFE

Confined Space



Confined Space Evaluation Form

NOTE TO ENTRY SUPERVISOR: Starting at the top of form, document your process by marking the appropriate check box and initialing. Once complete, turn in to Hoffman Project Supt., or his/her designee, for review and approval. Form to be filed at jobsite.

Date/Time:	Entry Supervisor Name:
Job Site:	Area:

♦START HERE♦

Is the space large enough and so configured that an employee can bodily enter it and perform work?
No ☐ INT._____ → This IS NOT a Confined Space — Supervisor: _____ Hoffman: _____
Yes ☐ INT._____

Does the space have a limited or restricted means of access and egress (i.e. tanks, vessels, silos, storage bins, hoppers, vaults, pits, walkable ceiling spaces, raised floors, building foundations)?
No ☐ INT._____ → This IS NOT a Confined Space
Yes ☐ INT._____

Is the space designed for continuous human occupancy?
Yes ☐ INT._____ → This is a Full-Permit Required Confined Space (Complete Full-Permit Form Prior to Entry) — Supervisor: _____ Hoffman: _____
No ☐ INT._____

This is a Confined Space

Continue

Does the space contain material that has the potential to engulf an entrant?
Yes ☐ INT._____ → This is a Full-Permit Required Confined Space
No ☐ INT._____

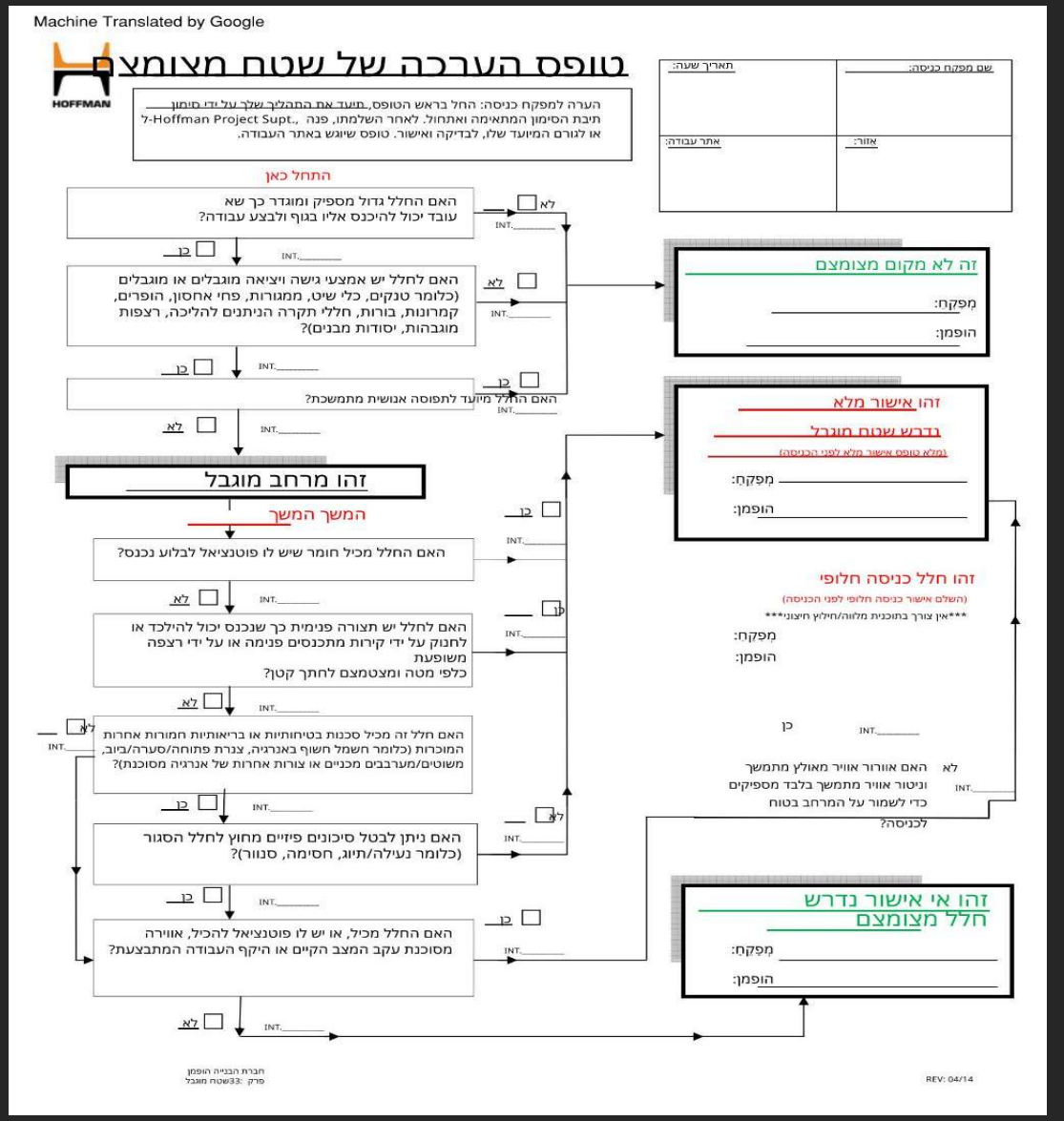
Does the space have an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor that slopes downward and tapers to a small cross-section?
Yes ☐ INT._____ → This is a Full-Permit Required Confined Space
No ☐ INT._____

Does this space contain any other recognized serious safety or health hazards (i.e. exposed energized electrical, live open piping/storm/sewer, mech. paddles/mixers or other forms of hazardous energy)?
No ☐ INT._____
Yes ☐ INT._____

Can physical hazards be eliminated from outside the confined space (i.e. lockout/tag-out, blocking, blinding)?
No ☐ INT._____ → This is a Full-Permit Required Confined Space
Yes ☐ INT._____

Does the space contain, or have the potential to contain, a hazardous atmosphere due to existing condition or scope of work being performed?
Yes ☐ INT._____ → This is a Non-Permit Required Confined Space — Supervisor: _____ Hoffman: _____
No ☐ INT._____

Hoffman Construction Company
Chapter 33: Confined Space
REV: 04/14



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טופס הערכה של שטח מצומצם

הערה למפקח כניסה: החל בראש הטופס, תיעד את התהליך שלך על ידי סימון תיבת הסימון המתאימה ואתחול. לאחר השלמתו, פנה ל-Hoffman Project Supt., או לגורם המיועד שלו, לבדיקה ואישור. טופס שיוגש באתר העבודה.

תאריך שעה:	שם מפקח כניסה:
אתר עבודה:	אזור:

התחל כאן

האם החלל גדול מספיק ומוגדר כך שאפשר לעובד להיכנס אליו בגוף ולבצע עבודה?
לא ☐ INT._____ → זה לא מקום מצומצם — מפקח: _____ הופמן: _____
כן ☐ INT._____

האם לחלל יש אמצעי גישה ויציאה מוגבלים או מוגבלים (כלומר טנקים, כלי שיט, ממגורות, פתי אחסון, הופרים, קמרונות, בורות, חללי תקרה הניתנים להליכה, רצפות מוגבהות, יסודות מבנים)?
לא ☐ INT._____ → זה לא מקום מצומצם
כן ☐ INT._____

האם החלל מיועד לתפוסה אנושית מתמשכת?
כן ☐ INT._____ → זהו אישור מלא לבדרש שטח חוגבל (מלא טופס אישור מלא לפני הכניסה) — מפקח: _____ הופמן: _____
לא ☐ INT._____

זהו מרחב מוגבל

המשך המשך

האם החלל מכיל חומר שיש לו פוטנציאל לבלוע נכנס?
כן ☐ INT._____ → זהו אישור מלא לבדרש שטח חוגבל
לא ☐ INT._____

האם לחלל יש תצורה פנימית כך שנכנס יכול להילכד או לחנוק על ידי קירות מתכנסים פנימה או על ידי רצפה משופעת כלפי מטה ומצטמצם לחתך קטן?
כן ☐ INT._____ → זהו חלל כניסה חלופי (השלם אישור כניסה חלופי לפני הכניסה) ***אין צורך בתוכנית מלווה/חילץ חיצוני*** מפקח: הופמן:
לא ☐ INT._____

האם חלל זה מכיל סכנות בטיחותיות או בריאותיות חמורות אחרות המוכרות (כלומר חשמל חשוף באנרגיה, צנרת פתוחה/סערה/ביוב, משוטים/מערבבים מכניים או צורות אחרות של אנרגיה מסוכנת)?
כן ☐ INT._____ → האם אוורור אוויר מאולץ מתמשך וניטור אוויר מתמשך בלבד מספיקים כדי לשמור על המרחב בטוח לכניסה?
לא ☐ INT._____

האם ניתן לבטל סיכונים פיזיים מחוץ לחלל הסגור (כלומר נעילה/תיוג, חסימה, סנוור)?
כן ☐ INT._____ → זהו אי אישור נדרש חלל מצומצם — מפקח: _____ הופמן: _____
לא ☐ INT._____

האם החלל מכיל, או יש לו פוטנציאל להכיל, אווירה מסוכנת עקב המצב הקיים או היקף העבודה המתבצעת?
כן ☐ INT._____
לא ☐ INT._____

חברת הבנייה הופמן
פרק 33: שטח מוגבל
REV: 04/14

Daily Coordination Meeting