

Electrical Work Permit

Permit No.

Date Issued

Valid Until

Building/Site Name

Location

Applicant/Contractor

Contact No.

Work Description

Scope of Electrical Work

Description	Location	Start Date	End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Risk Assessment & Safety Precautions

Isolation Requirements (if any)

Permit Authorizations

Applicant / Contractor

Site Supervisor / Engineer

Safety Officer

Authorized Person