



PTW AUDIT CHECKLIST

DEPT.:		Total no. of PTW Audited:			
PROJECT / LOCATION:		Ref No.:			
INSPECTOR: <i>(write name/ designation)</i>		DATE:			
NO.	ITEM	OBSERVATIONS		REMARKS / RECOMMENDATIONS / CORRECTIVE ACTIONS	PTW No. WITH VIOLATION
		OK	NOT OK		
A					
1	Correct type of PTW issued				
2	PTW issuer have valid certification				
3	PTW receiver have valid certification				
4	Joint site inspection conducted				
5	JSA attached with the PTW				
6	PTW heading filled up correctly				
7	"Exact work location" identified				
8	"Tools & Equipment to be used" complete				
9	"Additional Precautions complete"				
10	Gas testing information complete and proper				
11	Gas testing conducted prior to and during the work				
12	Issuer and Receiver signatures proper				
13	If PTW is extended, is signatures and time proper				
14	PTW properly closed out at end of job?				
15	PTW available at site				
16	Receiver/delegate available at site				
17	Work scope defined properly				
18	Equipment properly identified				
19	Hazard properly identified				
20	Pre-cautions properly defined				
22	Pre-cautions properly defined				
23	Receiver following PTW instructions				
24	Barricade/warning signs adequate				
25	PPE adequate				
26	Issuer's lockout/hold tag adequate				
27	Receiver's lockout/hold tag adequate				
28	Standby man available				
29	Tools in acceptable condition				
30	Scaffolding acceptable				
31	Acceptable excavation procedures				
	Others				
General Comments:					