| I. General Information | | | | | |
|------------------------------------|---|--------------------------|--|--|--|
| Scope of Work Performed: | A brief description of the work to be performed. | | | | |
| Departments/ Contractors Involved: | All departments and, if applicable, contractors who are involved in the work to be performed. | | | | |
| Estimated Start Date: | | Estimated Start Time: | | | |
| Estimated End Date: | | Estimated End Time: | | | |
| Work Areas and/or Buildings: | | | | | |

| Required Safety Measures: | All buildings and systems affected as a result of the work being performed (e.g.,no steam,no electricity). All safety measures that must be in place for the work to be performed, which could inclu measures such as: i. Proper training to work on the equipment. ii. Any required certifications. iii. Carefully inspecting all equipment prior to performing the procedure. iv. Forcedair ventilation and aimonitoring equipment will be utilized. v. Barricade hatch openings to protect workers and others from fall hazards. vi. Voice communication will be maintained betweecanedce231r(T4 Tc)0 Tc 33 I2C.3 -2 (Hot work saety measures mut be place. |
|--|---|
| Required Notifications: Required Permits/ Forms/Authorizations: | If different PPE is required for the tasks being performed, that should be specified. All departments/persons who must be notified before, during, and/or after the work, as necessary(e.g.,EHS, University Police, Evanston Fire Department, Central Utility Plant). Any additional permits, forms, or authorizations necessary for this work to occur (e.g., Cc Space Permit, Confined Space Reiflastion Form, Hot Work Permit, Live Electrical Authorization). |

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| III. Procedure | Estimated Duration | Person(s) Involved |
|----------------|-----------------------|--------------------|
| 11. | | |
| 12. | | |

13.

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Safe Operating Procedure Guide

- 1. Call University Polic**&**:47-491-3456, 911, or 456 from any campus phone.
- 2. Stop all work.
- 3. Investigate and document the incident, including any required OSHA Injury and Illness information.
- 4. After the investigation is complete and it is determined to be safe to resum.9 2.6 (ui)suike(n)(4)-4 () Tf -0.004 Tc J

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VII. Notes

Write any noteworthy information here, including issues noted during tv5

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