

Hot Work Permit for Nova Scotia Public Schools



A *Hot Work Permit* may be approved for a maximum of five days over a two-week period.

Application Date:						
Teacher's Name (Please print):				Teacher's Phone Number (in case of emergency):		
Hot Work date(s) and times			Continuous Fire Watch for 1-hour after hot works stops		Final Inspection 4-hours after hot work stops	
Date	Start Time	End Time	Signature	Time	Signature	Time

Classroom:	Specific Area of Classroom:
Provide details of the <i>Hot Work</i> activity:	
Describe risks and hazards, including mitigating strategies to eliminate or reduce risk and hazards:	

This is page 1 of this permit. See page 2 on the other side of this sheet

A - Teacher Checklist

I have read and will follow the hot work guidelines outlined in the *Hot Work Procedure (September 2022)* document. For each day listed on this *Hot Work Permit*:

- a) I will be responsible for a continuous fire watch during the hot work and 1-hour after the hot work stops. I will ensure there are no signs of smoke or fire and appropriately discard any waste that may cause a fire hazard.
- b) I will be responsible for the final inspection 4-hours after the hot work activity ends. Yes / No
- c) On the days listed below, I am requesting that the responsibility for the final inspection 4-hours after the hot work activity ends be transferred to another trained employee.

Days requested: _____

Teacher's Signature: _____

B - Administrator Checklist

For each day listed on this *Hot Work Permit*:

Does the responsibility for the final inspection 4-hours after the hot work activity ends need to be transferred to another trained employee? Yes ☐ No ☐

Employee's Name: _____ Dates: _____

Is that employee trained and following the procedures in the *Hot Work Permit Process*? Yes ☐ No ☐

Hot Work Permit Approval by Administrator

Signature:	Name (Please print):	Date:

Original – returned to teacher

Copy 1 – filed at the school office

Copy 2 – trained employee

C - Trained Employee's Checklist (if required)

On the day(s) listed in Section B above, I am completing the final inspection 4-hours after the hot work activity ends.

I will check the area for signs of smoke or fire and assuming there are none, I will sign both the original Hot Work Permit posted in the classroom and this copy, indicating the time of my inspection.

After each inspection, I will return this copy of the permit to the school office in the designated location.

Employee's Signature: _____

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