

University of New Hampshire

Confined Space Assessment Form

Section I– General	Information				
Space Name: Plumbing Pit			Space	e Description:	Plumbing pit with approximately
Space No./ID:	088009		1.5'x2.5' bolted cover. Furthest pit away from door (of 2)		
Space Location:	HORTON SOCIAL SCIENCE CENTER AB12		When entering room.		
Section II– Confined Space Yes			No		Comments
Can you enter and perform assigned work?		X	INO	Need to remove limited size of er	cover, entry would be difficult due to
Are there limited/restricted means for entry or exit?		Х			
Is space not designed for continuous employee occupancy?					
If answer to all three above are yes, the space in question is considered a confined space. If it is determined the space is a confined space, complete section II to determine if space is considered a permit required confined space.					
		Yes	No		Comments
Contains or has the potential to contain a hazardous atmosphere? <i>If</i> yes, <i>list under comments.</i>		Х		Hydrogen sulf	ide, oxygen deficiency, methane, LEL
Contains a material that has the potential for engulfing the entrant? <i>If</i> yes, <i>list under comments</i>		Х			Water/liquid
Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which sloped downward and tapes to a smaller cross section?			х		
Contains any other recognized serious safety hazard? If yes, list under comments				Electrical	for pumps, mechanical, biological
If the answer to any one of the above in section two is yes, the space in question is considered a permit required confined space.					
Section IV – Comments/Other Please list or identify any additional comments or concerns below such as description of entry portal, access restrictions and/or traffic concerns, etc X Greater than 4' vertical travel					
Horizontal Entry					
Can space be reclassified? Yes No X					
Can alternate procedures be used? Yes No X					
Name: Matthew Smith Date: 09/09/2014					re: 09/09/2014