



## Group Lockout Tagout Permit Form

"The Quality Way"  
Our People, Our Customers, Our Community

Primary Authorized Team Member (Print Name):	
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Date:		Energy Sources		
System / Equipment:		Electricity (AC/DC) <input type="checkbox"/>	Pneumatic <input type="checkbox"/>	Hydraulic <input type="checkbox"/>
Work Order Number:		Mechanical <input type="checkbox"/>	Chemical <input type="checkbox"/>	Thermal <input type="checkbox"/>
SIPP Number (if applicable):		Stored (Gravity) <input type="checkbox"/>	Other <input type="checkbox"/>	
Description of Work:				
Lockbox Number:				

Red Personal Locks					
Tag / Lock ID	Isolation Device Location	Locked Out (Initial/Date)	Energy Isolation Verification (Initial)	Print Name	Lockout Removal ( Initials /Date)

[illegible]