## **Ball State University**

## **Tunnel Entry Permit**

Name of All People Ente			Date:			
1.				unnel Permit		
2.			E	expires:		
3.						
4.			Purpose			
5.			of Entry:			
Outside Contact (Manda	itory):					
		\	Work Orde	r#:		
Space To Be Entered:	Rescue Hatches:			Mile Markers:		
Zone 1	From (Begin)			From (Beg	jin)	
Zone 2						
Zone 3	To (End)			To (End)		
Zone 4	L					
Hazards Present In Space:		PPE and Entry Requirements:			Co	mmunication:
☐ Electrical		Supervisor N	lotified			Radio
☐ Moving Parts	Flashlight/Portable Lighting (Required)				Line of Sight	
Configuration/Shape		PPE (Bump Caps) (Required)				Verbal
☐ ACM:	Two Persons (Minimum) (Required)					
☐ Hot Work		Other:				
☐ Tripping Hazards						
Other:						
— Other.						
AUTHORIZATION TO EN	TER TUNNEL SP	ACE:				
Signature:				Date:		
TERMINATION OF ENTRY	Y PERMIT:					
Signature:			Time:		Date:	

 $Original\ Copies\ should\ be\ sent\ to:\ Environmental\ Health\ \&\ Safety\ Office\ ,\ Ball\ State\ University$