

# Appendix 5A

## Forms

The following forms are not available electronically. Contact Forms (Supply and Distribution) at x36164 unless otherwise stated below to get a copy, or copy one out of this appendix:

JSC Form 1475	Hot Work-Welding-Cutting Permit
JSC Form 8	Hazardous Operation Permit
JSC Form 353	Certification/Recertification
JSC Form 209	Application and Record of Qualification for Personnel Certification

The following forms are available electronically via forms search at the following Web address:  
<http://forms.jsc.nasa.gov/>

JSC Form 1316	Small group weather safety action plan template
JSC Form 1317	Large group weather safety action plan template

**Appendix 5A, Forms  
(cont.)**

**JSC Form 1475  
Hot Work Permit**

		
☆GPO: 1986-662-643		
<b>HOT WORK — WELDING—CUTTING PERMIT</b>	<b>No.</b>	<b>15726</b>
Hot Work approval is given to (organization)		
To (weld, cut, etc.)		
Location (*Cooling Towers)		
Work Begins	Date	Time
Work Complete	Date	Time
Permit Expires	Date	Time
Supervisor's Signature		
Responsible Safety Representative		
Area Fire Warden		
<p>NOTIFY ALARM MAINTENANCE PRIOR TO AND AFTER COMPLETING WORK (4658 or 3744).</p> <p>MAINTAIN A FIRE WATCH DURING AND FOR 1 HOUR AFTER THE COMPLETION OF HOT WORK.</p> <p>REMOVE LOOSE COMBUSTIBLES, AND COVER FIXED COMBUSTIBLES WITH FIRE RESISTANCE BLANKETS.</p> <p>COVER OPENINGS IN WALLS, FLOORS, OR ROOFS AND PROTECT FACILITIES AND EQUIPMENT FROM SLAGS AND SPARKS WITH FIRE RESISTANT BLANKETS.</p> <p>KEEP WELDING LEADS OFF WALKWAYS.</p> <p>SET UP FLASH CURTAINS TO PREVENT AREA OCCUPANTS FROM BEING EXPOSED TO ARCS.</p> <p>*COOLING TOWER HOT WORK REQUIRES A WRITTEN JUSTIFICATION OF THE NEED AND A PROCEDURE FOR THE HOT WORK.</p> <p>THE FOLLOWING FIRE EXTINGUISHER IS REQUIRED AT WORK LOCATIONS:</p> <p>_____ WATER _____ FOAM _____ OTHER _____</p> <p>_____ CO<sub>2</sub> _____ DRY CHEMICAL _____ SIZE _____</p>		
JSC FORM 1475 (DEC 84) <b>JSC SAFETY OFFICE</b>		

# JSC Form 8

## Hazardous Operation Permit

<b>HAZARDOUS OPERATION PERMIT</b>		<b>No. 29044</b>
APPROVAL IS GIVEN TO		
(Organization)		
TO PERFORM OPERATION DESCRIBED BELOW:		
SPECIAL PRECAUTIONS TO BE TAKEN:		
OPERATION BEGINS	DATE	TIME
ESTIMATED COMPLETION	DATE	TIME
EXACT LOCATION OF OPERATION		
SUPERVISOR'S SIGNATURE		DATE
ISSUING AUTHORITY		DATE

Jsc FORM 8 (JUN 04) Safety Office



THIS SIDE TO BE COMPLETED AT CLOSE OF HAZARDOUS OPERATION AND RETURNED TO JSC SAFETY OFFICE.		
ACTUAL COMPLETION	DATE	TIME
DISCUSS ANY UNUSUAL CIRCUMSTANCES WHICH MAY HAVE OCCURRED DURING OPERATION.		
SUPERVISOR'S SIGNATURE		
REVIEWED BY (JSC SAFETY OFFICE)		
REMARKS:		

**Appendix 5A, Forms  
(cont.)  
JSC Form 353  
Certification/Recertification**

<b>SIGNATURE OF EMPLOYEE</b>	<b>NASA</b> <b>Lyndon B. Johnson Space Center</b> <b>CERTIFICATION/RECERTIFICATION</b>	DATE
	This is to certify that	
	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> (Name) <span style="float: right;">Code</span> is qualified to perform the operations listed hereon:	
SIGNATURE OF CERTIFYING OFFICER		

JSC FORM 353 (REV JUL 81)

**NASA-JSC**

This certificate is issued as government property and shall be surrendered to the certifying officer when: <ul style="list-style-type: none"> <li>a. leaving JSC employment</li> <li>b. refused recertification</li> <li>c. certification is revoked.</li> </ul> <p style="text-align: center;"><b>RECERTIFICATION</b></p> Required every _____ and signed by the cognizant certifying officer.	
DATE	CERTIFYING OFFICER

Appendix 5A, Forms

(cont.)

JSC Form 209

APPLICATION AND RECORD OF QUALIFICATION FOR PERSONNEL CERTIFICATION

SECTION I

1. TYPE OF CERTIFICATION		
2. APPLICANT/TRAINEE	3. ORGANIZATION	4. DATE
5. WHERE	6. YEARS OF EXPERIENCE	7. TYPE
8. TECHNICAL TRAINING		
9. APPLICANT/TRAINEE SIGNATURE	10. APPROVAL (SUPERVISOR SIGNATURE)	

SECTION II—PHYSICAL EXAMINATION (If applicable)

11. EXAMINER	12. DATE
13. RESTRICTIONS	

SECTION III—TRAINING EXAMINATION

14. NAME, DATE, AND LENGTH OF TRAINING		
15. ORAL	16. WRITTEN	17. OPERATIONAL
18. EXAMINER/INSTRUCTOR (COMMENTS AND RECOMMENDATIONS)		
19. EXAMINER/INSTRUCTOR (SIGNATURE)	20. DATE	

SECTION IV

21. CERTIFYING OFFICER'S COMMENTS	
22. CERTIFIED IN CATEGORY	
23. NOT QUALIFIED FOR CERTIFICATION	
24. REQUIRES RECERTIFICATION	
25. CERTIFYING OFFICER (SIGNATURE)	26. DATE

JSC Form 209 (Rev Jul 81)