

PROJECT TITLE	JOB NUMBER	DATE & TIME
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EQUIPMENT TO BE LOCKED/TAGGED OUT

	EQUIPMENT NUMBER	DESCRIPTION
1		
2		
3		
4		
5		

EMPLOYEES INVOLVED IN WORK TO BE PROTECTED BY LOCK OUT

	PRINT NAME	EMPLOYEE NUMBER
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

INSTALLATION SIGNATURES

PLANT OPERATIONS (SHIFT SUPER)	HOUSTON CONTROLS SUPERVISOR	SAFETY
PLANT CONTRACTOR COORD.	OTHER _____	OTHER _____

REMOVAL SIGNATURES

PLANT OPERATIONS (SHIFT SUPER)	HOUSTON CONTROLS SUPERVISOR	SAFETY
PLANT CONTRACTOR COORD.	OTHER _____	OTHER _____

