

# Lockout and Tagout Written Instruction Form

[See which HDI procedures use this document](#)

<b>Lockout and Tagout (LOTO) Type:</b> <input type="checkbox"/> Authorized Worker (AW) with Written Instructions <input type="checkbox"/> Controlling Organization (CO) with Written Instructions <div style="text-align: right;"> <input type="checkbox"/> Lock Box (LB): CO-LB-  <input type="checkbox"/> No Lock Box: CO LOTO Number: CO- </div>	
<b>SECTION A</b>	Facility/Workspace: _____ Work Document: _____
	Specific Isolated Component/System: _____
	Isolation Boundary Determined By: <input type="checkbox"/> Walkdown <input type="checkbox"/> Use of controlled as-built drawings/databases (list): <input type="checkbox"/> Other (standard operating procedure, technical instructions, etc.):
	<b>Potential Hazardous Energy Types and Magnitude:</b> <input type="checkbox"/> Electrical (Needs to include an Electrical Work Plan or Electrical Work Assessment): <input type="checkbox"/> Pressure: _____ <input type="checkbox"/> Thermal: _____ <input type="checkbox"/> Potential/Mechanical: _____ <input type="checkbox"/> Chemical: _____ <input type="checkbox"/> Other: _____
	<b>Special instructions/comments:</b> <input type="checkbox"/> Safe-to-Work Check by AW Rep. <input type="checkbox"/> Temporary Lift (use the <a href="#">Lockout and Tagout Temporary Lift</a> section below) <input type="checkbox"/> Temporary Protective Grounding <input type="checkbox"/> Tagout Plus <input type="checkbox"/> Other (describe): _____  If performing Tagout Plus, document the additional measures here:
	<b>Method to perform system isolation check:</b> (Identify a system isolation check method for <i>each</i> energy type identified above. For example, if the system isolation check involves the use of a contact meter to test for the absence of voltage on potentially energized components, follow the Electrical Work Assessment or Electrical Work Plan.)

Send completed forms to [Worker Safety and Health Records](mailto:ih.os.records@pnnl.gov) (ih.os.records@pnnl.gov).

## Lockout and Tagout Written Instruction Form

Lockout and Tagout Written Instruction Form Continuation Sheet					
Facility/Workspace:			Work Document:		
Isolated Component/System:					
SECTION B			SECTION C		SECTION D
The following isolation steps are required to be performed in sequence: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Energy Isolating Device Component ID and Description	Component Location	Required Component Position	Installed	Verified	Removed
1.					<input type="checkbox"/>
2.					<input type="checkbox"/>
3.					<input type="checkbox"/>
4.					<input type="checkbox"/>
5.					<input type="checkbox"/>
6.					<input type="checkbox"/>
7.					<input type="checkbox"/>
8.					<input type="checkbox"/>
SECTION E	Preparer (Sections A and B):				
	Print		Sign		Date
	Technical Reviewer:				
	Print		Sign		Date
	Installation Authorized by CO (Section C):		Installation and System Isolation Check Complete:		
	Print                      Sign		Print                      Sign		
	Date		Date		
	Per Telecom <input type="checkbox"/>				
	Removal Authorized by CO (Section D):		Removal Complete:		
	Print                      Sign		Print                      Sign		
	Date		Date		
	Per Telecom <input type="checkbox"/>				

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Isolated Component/System:					
SECTION B			SECTION C		SECTION D
Energy Isolating Device Component ID and Description	Component Location	Required Component Position	Installed	Verified	Removed
9.					<input type="checkbox"/>
10.					<input type="checkbox"/>
11.					<input type="checkbox"/>
12.					<input type="checkbox"/>
13.					<input type="checkbox"/>
14.					<input type="checkbox"/>
15.					<input type="checkbox"/>
16.					<input type="checkbox"/>
17.					<input type="checkbox"/>
18.					<input type="checkbox"/>
19.					<input type="checkbox"/>
20.					<input type="checkbox"/>
21.					<input type="checkbox"/>
22.					<input type="checkbox"/>
23.					<input type="checkbox"/>
24.					<input type="checkbox"/>
25.					<input type="checkbox"/>
26.					<input type="checkbox"/>
27.					<input type="checkbox"/>

## Lockout and Tagout Written Instruction Form Review Sheet

Work Document:

## Authorized Worker Written Instruction Review

## Print Name

**Signature**

**Date**

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