	(General Work Permit number	or Routine work order			
In case of emergency call:	LOCK OUT TAG OUT (LOTO)				
760-476-2202	WORK PERMIT	Viasat			
Local regulatory requirements will govern if more stringent than the requirements identified in this permit. The work governed by this permit must stop if the permit conditions are no longer met. This permit is only valid when all sections are completed and signed by the appropriate individuals, up to and including Hand Over (Section 4). Only the tasks outlined in this permit are to be performed. Any additional tasks or variations thereof require a re-evaluation with inclusion of this permit. This permit should only be applied for situations where 'No Equipment/ Installation Specific Procedure' is available , when this Equipment/ Installation Specific procedure cannot be used or when-contractors (embedded or not) who are not trained in local site procedures are involved in activities requiring Lock Out/ Tag Out					
Section 1 General Information					
This permit is linked to:					
A General Work Permit or	No:				
An SOP or other written work instruction	Reference:				
Work Order or/ and Equipment Specific Procedure number	er:				
Permit LOTO Requested by: (name & company)	On: (date)	On: (date)			
Permit LOTO valid from: (date & time)	To: (date & time; max. 6 mont	To: (date & time; max. 6 months)			
Plant/ department/ area/ installation/ equipment:					
Work description:					

If the Permit To Work involves High Voltage (>600V) people authorizing the work must be High Voltage Compentent.							
Section 2 A Scope of Work - Energy Identification							
1.	Identify all energy sources. Additional tables might be needed.						
Energy Type	Magnitude	LOTO Location	Step(s) to de-energize	Step(s) to release stored energy	Step(s) to verify 'Zero Energy' state	Startup sequence	
Electrical							
Pneumatic							
Hydraulic							
Water							
Steam							
Gas							
Specify chemicals							
Other							
Other							
Other							
Other							
Stored energies magnets/ Springs/ Gravity,							

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2.	Can all identified energy sources be de-energized and locked out?				
	🗆 Yes	□ No: Explain how you will lock out energy sources that cannot be locked:			
		- No. Explain now you will lock out energy sources that cannot be locked.			
3.		Will the LOTO extend beyond one	(1) shift?		
	🗆 Yes - Go to que		□ No – Go to section 2 B		
4.			Have arrangements for Lock Transfers been made and agreed upon?		
	X Yes- Go to Section	on 2B	□ No - Do not continue!		
	🗆 NA (explain)				
6					
	ction 2B	Process Typ	e Installation		
1.	Yes - Go to que	stion 2	Is this a process type installation?		
2.			Will a P&ID or other as built drawing that details the energy isolation		
	devices be used t		osed/opened to de-energize the process and to be locked out and tagged		
	out?	, ,			
	□ Yes: P&ID/draw	/ing #:	□ No: How will you ensure correct valves are locked out?		
		-	·		
3.			Will this activity include the opening of a closed system (process)?		
	Yes: Apply Line		□ No		
4.			Can physical disconnections be made to prevent inadvertent energization?		
	🗆 Yes		□ No		
5.			Can blanks be installed? N/A		
6.	🗆 Yes		No Son (Double Block and Block' minsiple to applied) N(A(
0.			Can 'Double Block and Bleed' principle be applied? N/A/		
	□ Yes		□ No: How will the system be de-energized? N/A		
		ing with flammables and toxic substances which can cause adverse isolation is not acceptable and additional precautions are required.			
		ons shall be agreed upon with the local EHS department.			
Se	ction 2C		n and Completion		
1.		ees have been informed of the LOTO and instructed	on the importance of complying with the LOTO procedure		
2	□ Yes	winmont (process has been shut down and sleaned	No: Why not? (state below)		
2.	□ Yes	uipment/ process has been shut down and cleaned,	□ No: Why not? (state below)		
3.		es identified referenced in section 2A will be isolated	• • •		
•••	□ Yes		□ No: Why not? (state below)		
4.					
	🗆 Yes		□ No: Why not? (state below)		
5.		identified above will be released			
~	□ Yes	antified will be wantfied	No: Why not? (state below)		
6.		entified will be verified	□ No: Why not? (state below)		
7.		tate' will be verified using the three-step process by	an electrical qualified person and using an approved test instrument		
	□ Yes	······································	No: Why not? (state below)		
8.	The documented	start up sequence will be applied and the affected e	employees will be informed of the LOTO completion		
	🗆 Yes		□ No: Why not? (state below)		
No	: Why not?				

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Section 3 Authorization and Acceptance					
PTW Supervisor/Subject matter expert or authori	zed designee				
I give authorization for the described work to proceed as per the conditions of this permit and I am satisfied that all the hazards associated with this permit to work are controlled.					
Name:	Phone:	Signature	Date & Time:		
Additional requirements:					
□JSA or □Safe-Plan-of-Action or □Work Instruction	on mandatory for activity(s)			
Person in Charge					
further confirm that I have explained the permit co	onditions and control mea	nowledge, information, tools and equipment to perform sures with the Person(s) Carrying Out the Work and I			
person(s) have received site orientation and gener Name & Company:	al emergency procedures. Phone:	It is safe to perform the work as defined above. Signature	Date & Time:		
Name & Company.	FIIONE.	Signature	Date & Time.		
		n Carrying Out The Work (no further signatures requi	ired)		
Will four (4) or more people be involved in the acti	vity requiring LOTO to be				
No - apply INDIVIDUAL LOTO INDIVIDUAL LOTO		□ Yes - apply GROUP LOTO			
	en explained to me and by	virtue of my signature I commit of adherence to the	permit conditions. Each		
person working on the job must sign.			P		
Persons Carrying Out The Work have si	gned on the documented	risk control procedure (Safe Plan of Action) (check if	applicable)		
Name & Company:	Phone:	Signature	Date & Time:		
GROUP LOTO					
	en explained and by virtue	of my signature I commit of adherence to the permi	t conditions		
Name of Authorized LOTO Leader & Company:	Phone:	Signature	Date & Time:		
-		ployee to the group Lock Out device (clasp/ lockbox,) when he/ she starts		
work and shall remove those devices when his/ he Section 4	Hand Over (S	- ·			
Area owner					
	oed work and I am satisfie	d that all isolations are completed and the hazards a	ssociated with this work		
		ork will be performed and I have not observed issues	which should prevent		
the work from proceeding. I give authorization for					
• Are the Utility System owners informed?	□ Yes				
Are the Area Owners of possible affected area					
I have informed all affected Employees	□ Yes				
Name & Company:	Phone:	Signature:	Date & Time:		
		.			

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Section 5		Hand Back (E	nd of Work)			
Person in Charge/ LOTO Leader (Gro						
All activities associated with this perm				tions are removed	, the system has ben	e restored to safe
operating condition and the area has		•	ition.	Data 9 Tim		
Name & Company:	Signature:		Date & Time:			
						••
Area owner						
I have verified, through in place inspe	ection, that the activit	ies associated witl	h this permit have be	en completed and	that the area has be	en left in a safe,
clean and tidy condition.						
Name & Company:	Signat	ure:		Date & Time:		
Section 6		Extension of	of Validity			••
I have verified that General Work Per	mit no			nen extension of va	lidity of this LOTO n	ermit is given
	I have verified that General Work Permit no					0
Permit extension until	expert or authorized designee				Group LOTO : Loto Leader signs	
(Date & time, max 7day/extension)	Name:	Signature:	Name:	Signature:	Name:	Signature:
	•••••		•••••		•••••	
Nothing in this Permit shall cause the Owner (Viasat Inc.) to assume responsibility for any of the legal obligations of the Contractor performing the work						
under applicable laws or the requirements of the Agreement governing the work."						

THIS WORK PERMIT MUST BE POSTED IN THE WORK AREA / UPON JOB COMPLETION THIS SIGNED PERMIT MUST BE MAINTAINED FOR 24 MONTHS