

Confined Space Visitor Briefing



Confined Space Description:		Date:
Confined Space Number:		Visitor Name:
Visitor Host Name:		Nominated Competent Person:
Reason for entry:		
No:	Requirements:	Host to Initial:
1	Visitor has been briefed on the confined space entry requirements.	
2	Visitor is fit and able to enter the confined space.	
3	Visitor is briefed on the confined space hazards.	
4	Visitor is briefed on the confined space emergency plan.	
5	The host is confined space trained.	
6	The host is carrying a gas detector.	
I am aware that an untrained person is entering the confined space and is accompanied by a trained host. I am satisfied they are adequately supervised and will not be alone while in the confined space.		
Safety Watch:		Signature:
Head of Generation		Signature:

Visitor Confined Space Sign on Register:

I have been advised and briefed on the work task, the hazards related to the work, the precautions that will be taken and the emergency response plan. As a visitor I agree to abide by all the requirements of the Confined Space certificate.

Name of Confined Space entrant	Time of Entry	Time of Exit	Time of Entry	Time of Exit

The completed sheet is to be retained with the confined space entry certificate