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SAFETY SYSTEM DEFEAT CERTIFICATE

Certificate No.: _____

Record TBT proceedings on back of the card copy

Initiation

SSDC Begins_____ Hours   Date_____
SSDC Expires_____ Hours   Date_____

Defeat related HSE Hazards / Risk Analysis (To be Filled by Technical Authority)

Vulnerabilities (Hazards/ Threats) _____
Risk (Damage Expected) _____
Probability _____
Consequence _____
Risk Rating _____
Controls _____

Extended Upto_____ Hours Date_____
                         Extended by_____

Section 1 - Description of Defeat

Location / Installation:		Original Associated Work Permit No.:	
System/ Equipment to be Defeated:		Work Continuing on Permit No.:	
Tag No.:		Loop Drawing / Cause & Effects Attached:	YES / NO

Reason of Safety System / Safety Equipment Defeat

Section 2 - Defeat Implementation Request (by Requester/Performing Authority)	**Section 5 - Defeat Removal Request (by Requester/Performing Authority)**
Contractor/Dept.: Name: Signature: Date / Time:	I hereby certify that work is sufficiently completed to allow for reinstatement Contractor/Dept.: Name: Signature: Date / Time:

Section 3a - Details of Defeat[2] (by Isolating Authority[1]) - Inhibit/Override/Isolation

Section 3b - Details of Safeguards (Precautions and Mitigations) while System/Equipment is Defeated

1: Isolating Authority for the application and removal of Defeats/Inhibits/Overrides is typically the Control Room Operator or an Instrument Technician
2: Where applicable, isolation points to be tagged.

Section 4 - Implementation of Defeat	**Section 6 - Removal of Defeat**
4a. I hereby approve[2] the defeat as described in Section 3 Approving Authority(Incharge of Process/Producti Signature: Date / Time: I hereby authorise the defeat as described in Section 3 Issuing Authority Name: Signature: Date / Time:	6a. I hereby authorise removal of the defeat as described in Section 3 Issuing Authority Name: Signature: Date / Time:
4b. I hereby certify that the defeat has been applied as described in Section 3 Isolating Authority[1] Name: Signature: Date / Time:	6b. I hereby certify that the defeat has been removed Isolating Authority[1] Name: Signature: Date / Time:
4c. I hereby certify that the defeat is in place Area Authority Name: Signature: Date / Time:	6c. I hereby confirm that the defeat has been removed and site has been returned to its initial state Area Authority Name: Signature: Date / Time: