



Emergency Lockout/Tagout Device Removal

This form must be fully completed by Maintenance and/or an authorized employee approving the removal of the lockout/tag-out device anytime any individual other than the individual who applied the lockout/tag-out device must remove a device. All reasonable efforts must first be made to contact the original applier of the lockout/Tagout device to personally remove it prior to proceeding with the “Emergency Safety Lockout/Tagout Device Removal Procedure.” Contact another authorized employee, Maintenance, Engineering, and/or Safety if assistance is needed.

Employee Name Initiating Lock Removal: _____

Name of Authorized Employee whose device is being removed: _____
(Contacted, Unable to contact – Select One)

Date and Time Authorized Employee contacted: _____

Date of Removal: _____ Time of Removal: _____

Description/Location of equipment to which LO/TO device is applied:

Emergency Safety LO/TO Device Removal Procedure (Check off as completed)

- _____ Review equipment specific protocol
- _____ Check the area around the equipment to ensure no one is exposed
- _____ Notify all affected employees that the lockout/tagout device will be removed but that the equipment is not ready for them to resume normal usage
- _____ Ensure all tools have been removed from equipment and guards have been reinstalled
- _____ Confirm that normal STOP devices are engaged on machinery
- _____ Remove lockout and tagout devices
- _____ Restore power to the piece of equipment
- _____ Disengage STOP devices and ensure equipment is operating properly and correctly. If it is not working properly, assign a new authorized person and have them attach their lockout/tagout device(s)
- _____ Return equipment/machinery to production

Signature of Supervisor in charge of procedure: _____

Return to the EHS Department