

Lockout/Tagout Program Lock Removal Form

General Information:		
Date & time of initial request to remove lock:	Lock owner's department/shop:	
Name of lock owner whose lock/tag is to be removed:	Name of lock owner's supervisor:	
Equipment & location:		
Is it absolutely necessary for the equipment to be reenergized before the lock owner can return to personally remove the lock? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes", explain why:		
Document Reason for Removing Lock: (i.e. Lock owner called in sick, lock owner forgot to remove lock before leaving site, etc.)		
Document attempts to contact lock owner prior to removal:		
Date & Time	Method of Attempted Contact	Result
Lock Removal:		
<input type="checkbox"/> Verify that the lock will be removed by the supervisor of the lock owner or the supervisor's direct designee.		
<input type="checkbox"/> Verify that the supervisor of the lock owner or the supervisor's direct designee has reviewed the equipment to ensure that it can be safely reenergized.		
Lock removed by:	Date & time of removal:	
Notifications:		
<input type="checkbox"/> Verify that lock owner has been informed of lock removal prior to beginning the next shift.		

Signature of Lock Owner's Supervisor: _____