

**APPENDIX A**

**HAMPSHIRE COLLEGE  
INSPECTION AND VENTILATION RECORD**

**SECTION 1: INSPECTION**

**DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_

**LOCATION OF SPACE:** \_\_\_\_\_

**PURPOSE FOR ENTRY:** \_\_\_\_\_

ENTRANTS LOG: Name	Time In:	Time Out:	ATTENDANT: Name	In	Out

<b>VISUAL INSPECTION:</b>	<b>TEST</b>	<b>RESULTS</b>		
	O2	19.5	<input type="checkbox"/>	23.0
	LFL	< 10%	<input type="checkbox"/>	
<b>CONTROL MEASURES IN PLACE:</b>	CO	< 35ppm	<input type="checkbox"/>	
	H2S	< 10ppm	<input type="checkbox"/>	

**NO HAZARDS IDENTIFIED OR ANTICIPATED.**

**Signed:** \_\_\_\_\_

**SECTION 2: VENTILATION REQUIRED SPACES**

CRAWLSPACE	INTRODUCED HAZARDS		FAILED AIR TEST			
	DESCRIBE	DESCRIBE	RETEST	RESULTS:		
			O2	19.5	<input type="checkbox"/>	23.0
			LFL	< 10%	<input type="checkbox"/>	
			CO	< 35ppm	<input type="checkbox"/>	
			H2S	< 10ppm	<input type="checkbox"/>	

**EQUIPMENT IN PLACE:**  VENTILATION,  BARRIERS,  OTHER (describe): \_\_\_\_\_

**SUPERVISOR NOTIFIED:** \_\_\_\_\_

MONITOR ALARM:	In	Out	Retest:	In	Out
Reason:					

**SECTION 3: TASK COMPLETED - TIME:** \_\_\_\_\_ **PROBLEMS ENCOUNTERED:** \_\_\_\_\_

**SUPERVISOR'S SIGNATURE:** \_\_\_\_\_