

**Hazardous Energies Control and Lockout/Tagout**

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**Appendix A: Abandoned Lock Removal Form**

Note: Only supervisors can remove abandoned locks.

1) Name of person assigned to the lock that will be removed. \_\_\_\_\_

2) Has an attempt been made to contact the person assigned to the lock?  Yes  No

3) Why is it critical to remove this lock now?

\_\_\_\_\_

\_\_\_\_\_

4) Will the removal of this lock potentially cause incident or injury?  Yes  No

Note: If the answer is “Yes”, do not remove the lock until further guidance is received from Environmental Health & Safety.

Name of Supervisor Removing Lock: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Department: \_\_\_\_\_

If Lock Was Removed Under EH&S Supervision:

EH&S Representative: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_