**TÖÖ ALUSTAMISLUBA NR ……………………….**  
*PERMISSION TO START WORK NO*.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **KELLELT** *(nimi)/* *FROM WHOM (name)*: | | | | **KELLELE** (*nimi)/* *TO WHOM (name):* | | | |
| Tööohutusalane funktsioon: **Elektritöö juht**  *Occupational safety function: Electrical Work Manager* | | | | Tööohutusalane funktsioon/*Occupational safety function*:  **Töörühma juhile/** *To the Work Group Manager*  **Töö tegijale/***To the Work Executor*  **Töö jälgijale/***To the Work Supervisor* | | | |
| Telefoni nr.: *Phone No*.: | |  | | Telefoni nr:  *Phone No*. | |  | |
| e-mail: | |  | | e-mail: | |  | |
| Töörühma liikmed / *Work Group Members* | | …………………………………………………………………………………………………………………………………………….….  ………………………………………………………………………………………………….……………………………………………. | | | | | |
| Töö liik/ *Type of work*: | Pingevaba/*Dead* | | Pingelähedane/*In the vicinity of energized parts* | | Pingealune/*Live* | | Lihtsamad hooldustööd/*Simpler maintenance* |
| Töö sooritamis- loa (TSL) nr/*Permission to execute work (PEW) No.* | |  | | TSL väljastaja nimi ja aeg/*Name of the issuer of PEW and time*: | |  | |
| **Töökoht (remonditav seade)/** *Work location (device to be repaired)***:** | | | | | | | |
| **Töötoimingu kirjeldus/***Description of the work operation***:** ………………………………………………………………………………………………………………………………………………………………………  …………………………………………………………………………………………………………………………………………………………….………… | | | | | | | |
| **Erijuhised/***Special instructions***:**  ………………………………………………………………………………………………………………………………………………………………………  …………………………………………………………………………………………………………………………………………………………….………..  ………………………………………………………………………………………………………………………………………………………………………  …………………………………………………………………………………………………………………………………………………………….………… | | | | | | | |
| Töö alguse lubatud aeg/*Time allowed to start the work*: | | | | Töö lõpetamise tähtaeg/*Deadline for completion of the work*: | | | |

**TÖÖKOHA ETTEVALMISTAMISEKS TEOSTATUD MEETMED (SH KAITSELAHUTAMISED JA MAANDAMISED)/** *MEASURES APPLIED TO PREPARE THE WORK LOCATION (INCLUDING ISOLATIONS AND EARTHINGS)*

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| **Elektripaigaldise nimetus/***Name of the electrical installation* | **Kaitselahutamised/***Isolations* | **Maandamised/***Earthings* |
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**Elektritöö juht kinnitab oma allkirjaga, et on veendunud kõigi 5 põhi-ohutusreeglite nõuete täitmises (sh täielik kaitselahutamine, tagasilülitamise võimaluse välistamine, paigaldise pingetuses veendumine, maandamine ja lühistamine, juurdepääsu tõkestamine naabruses asuvatele pingestatud osadele) ja töökoht on tähistatud./***The Electrical Work Manager will declare by signature that they are convinced that all 5 basic safety rules have been fulfilled (i.e. full isolation, obviation of the possibility of re-switching, confirmation that the installation is deenergized, earthing and short-circuiting, blocking access to adjacent energized parts) and that the work location is marked.*

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| **Töö alustamisluba antud/saadud /** *Permission to start work granted/received***:** ………………………………………………… 20 ……….a kell/*time* ………........ | |
| Loa andja allkiri/*Signature of the issuer of the permission* | Loa saaja allkiri/*Signature of the recipient of the permission* |

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| **Töö alustamisluba pikendatud kuni/***Permission to start work extended until***:** | Kuupäev/*Date*: | Kell/*Time*: |
| Nimi/*Name*: | Allkiri/*Signature*: |

**IGAPÄEVANE TÖÖLEASUMINE JA TÖÖDE LÕPETAMINE/***DAILY COMMENCEMENT AND SUSPENSION OF WORK*

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| Töörühma liikmed juhendatud ja lubatud ettevalmistatud töökohale/*Work Group Members instructed and allowed in the prepared work location* | | | Töö lõpetatud, töörühm töökohalt eemaldatud/*Work completed, Work Group removed from the work location* | | |
| Töökoha nimetus/*Work location name* | Kuupäev / kellaaeg/*Date / Time* | Töörühma juht (töötegija, jälgija) allkiri/*Work Group Manager (Work Executor, Work Supervisor) signature* | | Kuupäev / kellaaeg/*Date / time* | Töörühma juht (töötegija, jälgija) allkiri/*Work Group Manager (Work Executor, Work Supervisor) signature* |
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**MUUDATUSED TÖÖRÜHMA KOOSSEISUS/***CHANGES IN THE COMPOSITION OF THE WORK GROUP*

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| Töörühma koosseisu arvatud (nimi)/*Included in the Work Group (name)* | Töörühma koosseisust välja arvatud (nimi)/*Excluded from the Work Group (name)* | Kuupäev / kellaaeg/*Date / time* | Töörühma juhi allkiri/*Signature of the Work Group Manager* |
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**TÖÖDE LÕPETAMISEST TEATAMINE JA VORMISTAMINE/***NOTIFICATION AND FORMALIZING COMPLETION OF WORK*

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| **Tööde täieliku lõpetamise teade antud/saadud/***Notification of work completion given/received***:** ………………………………………………… 20 ……….a kell/*time* ……… Töö on täielikult lõpetatud, Töörühma liikmed eemaldatud, Töörühma poolt paigaldatud maandused maha võetud, töökoht korrastatud/*The work has been completely finished, the Work Group Members have been removed, the earthings installed by the Work Group have been removed, order has been restored at the work location* | |
| Teate saaja/*Recipient of the notification*  nimi ja allkiri/*name and signature* | Teate andja/*Issuer of the notification*  Allkiri/*signature*: |