



OSHA 2264 - Permit-Required Confined Space Entry

When & Where: Class Time: 8:00am to 4:00pm

- April 22-24, 2019 -
- ABC-VA Chapter 1600 E Parham Rd Richmond, VA 23228
- June 17-19, 2019 -

Chesapeake Region Safety Council - 2555 Lord Baltimore Drive, Suites N-R Baltimore, MD 21244

• June 24-26, 2019 -

DE ABC 31 Blevins Drive, New Castle, DE 19720

• September 30-October 2, 2019 -

Chesapeake Region Safety Council - 2555 Lord Baltimore Drive, Suites N-R Baltimore, MD 21244

This is a comprehensive training program of permit space entry and rescue standards, OSHA 29 CFR 1910.146 Permit-Required Confined Space standard. This course is recommended for inspectors, auditors, safety and health professionals and those personnel responsible for writing, auditing or training employees with an active role in permit space entry. This course was developed and designed to educate participants about all aspects of 29 CFR 1910.146.

Objectives:

At the end of this course, student should be able to:

- 1. Discuss the requirements and interpretations for permit-required confined space entry
- 2. Discuss the scope, application and key definitions of the permit space standard
- 3. Describe the requirements for permit space programs and the permit system
- 4. Discuss the general training requirements of the permit space standard
- 5. Identify confined space equipment and their limitations
- 6. Explain employee roles in permit space operations
- 7. Identify the common hazards and citations involving confined space entry
- 8. Explain the types of permit space entry
- 9. Identify the responsibilities of host employers and contractors in permit space entry
- 10. Discuss the types of permit space rescue and the employer responsibilities



Class Price:

\$745 per student Includes: lunch, refreshments, and Resource Binder

This course includes training on the new OSHA standard for construction work in confined space effective August 3, 2015 - Subpart AA- 1926.1200

Registration Form- Please FILL OUT the Course Info Below:

Class Name: OSHA 2264 Class Date: (month/day/yr)/ Location: (city, state),							
Student Name(s):							
Company:	pany:Email:						
	City, State, Zip:						
Phone #:		Fax #:					4845
Indicate Payment Method: (please check)							
Check Enclosed	Please Invoice	V	/isa	Mastercard	American Express	Discover	_
Card #		_ CID #:	Ехр.	Date:	Name on Card:		