

(1)	(2)	(3)	(4)
<i>Name</i>	<i>Name</i>	<i>Name</i>	<i>Name</i>
<i>Title</i>	<i>Title</i>	<i>Title</i>	<i>Title</i>
<i>Employer (Contractor)</i>	<i>Employer (Contractor)</i>	<i>Employer (Contractor)</i>	<i>Employer (Contractor)</i>
<i>Address</i>	<i>Address</i>	<i>Address</i>	<i>Address</i>

**Date:**

### Re: Co-ordination Document for Confined Spaces

Confined Space: \_\_\_\_\_

Where the workers of more than one employer are to perform work in the same confined space or related work with respect to the same confined space, and before any worker enters the confined space or begins related work with respect to the confined space, the University of Guelph as the lead employer is required by Ontario Regulation 632/05, Confined Spaces made under the Occupational Health and Safety Act of Ontario, to prepare a **co-ordination document** to ensure that the duties imposed on employers by the regulation are performed in a way that protects the health and safety of **all workers** who perform work in the confined space or related work with respect to the confined space. As a matter of general information, this co-ordination document is intended to ensure that employers of workers working in a confined space are aware of potential or existing hazards that may be introduced by one or the other employer, and that there is communication between the employers in order to ensure worker safety. Also, the intent is to reduce duplication with respect to requirements such as the hazard assessment, plan, entry permit and procedures to follow in the event of an emergency but the document does not allow for sharing of responsibilities for general training, personal protective equipment and records.

Attached, please find the following documents regarding confined space(s) # \_\_\_\_\_:

Hazard assessment, plan, entry permits, procedures to follow in the event of an emergency; these documents shall be available and reviewed with all entrants and other related personnel prior to entry into the confined space.

\_\_\_\_\_ (Name and Department of Confined Space Supervisor)

\_\_\_\_\_ (Signature of Confined Space Supervisor)

\_\_\_\_\_ (Date)



## Employer(s) Acknowledgement

We the undersigned:

- have read and will comply with the requirements of Ontario Regulation 632/05;
- have read and will comply with the requirements of the University of Guelph Confined Spaces Management Program. We have received documentation regarding the hazard assessment, written plan, plan-specific training (as appropriate), entry permit and procedures to follow in the event of an emergency;
- have provided written evidence that all workers who are required to perform entry/work in the confined space or related work with respect to the same confined space have received appropriate training and instruction in accordance with the University of Guelph Confined Spaces Program.

#	Employer	Name/Title of Employer Representative	Signature/Date of Employer Representative
1			
2			
3			
4			