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| SLAC_Logo_hires_small  Environment, Safety & Health Division | Chapter 2: [Work Planning and Control](https://www-grouphttps://www-group.slac.stanford.edu/esh/general/wpc/)  Stop Work Form  Product ID: [453](https://www-internal.slac.stanford.edu/esh/docreview/reports/revisions.asp?ProductID=453) | Revision ID: 2343 | Date Published: 10 May 2021 | Date Effective: 10 May 2021  URL: [https://www-group.slac.stanford.edu/esh/eshmanual/references/wpcFormStopWork.pdf](https://www-grouphttps://www-group.slac.stanford.edu/esh/eshmanual/references/wpcFormStopWork.pdf) | [docx](https://www-grouphttps://www-group.slac.stanford.edu/esh/eshmanual/references/wpcFormStopWork.docx) |

When an imminent risk stop work has been issued, the supervisor (that is, the SLAC employee who authorized work) of the person whose work has been stopped must make sure this form is completed and observation recorded in as complete and objective a manner as possible. Upon request by the facility manager, ALD, or CSO, this form will also be used for non-imminent risk stop work.

When completed, copies of this form are to be sent to

1. Area / building manager
2. Department / division head
3. Directorate ESH coordinator
4. Associate laboratory director (ALD)
5. Chief safety officer (CSO)

Work may not be resumed until this form is signed, indicating re-authorization by the ALD and re-release by the area or building manager.

For additional information, see [Work Planning and Control: Stop Work Procedure](https://www-grouphttps://www-group.slac.stanford.edu/esh/eshmanual/references/wpcProcedStopWork.pdf) (SLAC-I-720-0A21C-003).

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| Section 1: Stop Work Issuance | | | |
| Directorate |  | Department |  |
| Location of operation |  | Date / time |  |
| Supervisor |  | Phone |  |
| Individual initiating stop work |  | | |
| Individual performing work |  | | |
| Work operation or condition (include names of individuals performing work) | | | |
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| Hazard (as stated by individual initiating stop work) | | | |
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| Additional observations | | | |
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| Section 2: Date / Time Informed | | | |
| Supervisor |  | Directorate ESH coordinator |  |
| Building / area manager |  | Associate laboratory director |  |
| Division / department head |  | Chief safety officer |  |
| Facility manager |  |  |  |

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| Section 3: Follow-up Action |
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| Section 4: Restart Concurrence | | | |
| Division / department head |  | Date |  |
| Directorate ESH coordinator |  | Date |  |
| CSO |  | Date |  |
| Section 5: Restart Authorization | | | |
| ALD |  | Date |  |
| Section 6: Restart Release | | | |
| Area / building manager |  | Date |  |