



APPENDIX D – ABANDONED LOCK/TAG REMOVAL FORM

Only a Supervisor or their designee can authorize the removal of locks/tags. All lock/tag removal forms must be retained by the Unit Responsible Person.

Building \_\_\_\_\_ Building No. \_\_\_\_\_  
Equipment Description \_\_\_\_\_ Location \_\_\_\_\_  
Requested By \_\_\_\_\_ Date \_\_\_\_\_

Name of Person whose lock/tag must be removed: \_\_\_\_\_

Has an attempt been made to contact him or her?  YES  NO

Describe Steps taken to contact him/her.

\_\_\_\_\_  
\_\_\_\_\_

Why is it critical to remove this lock/tag now?

\_\_\_\_\_  
\_\_\_\_\_

Are you sure it is safe to remove this lock/tag?  YES  NO

Authorized By: \_\_\_\_\_ UIN/Badge: \_\_\_\_\_

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

The lock owner must be informed of removal of their lock upon their return to work. Have the lock owner complete the section below verifying that they have been notified and return completed form to S&C.

Lock/Tag Owner: \_\_\_\_\_ UIN/Badge: \_\_\_\_\_

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