



OIL & GAS DEVELOPMENT COMPANY LIMITED

No: _____

POWER ISOLATION SLIP

Date of issue _____

Time of issue _____ hrs

This AUTHORIZES Electrical Section to turn ON/OFF the electrical supply
of (Unit) _____ Location _____ at _____ hrs

InCharge Shift _____

It is certified that the electrical supply of (unit) _____ has been turned
ON/OFF at _____ hrs date _____ and respective circuit breaker(s)
locked & tagged. _____

InCharge Shift _____