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FREEPORT-McMoRan
Morenci Operations

ENERGY CONTROL COORDINATOR FORM

ECC Name: _____ **Contact Info:** _____

Supervisor: _____ **Date:** _____

Warning!

If the equipment is not listed here, it is not locked out!

REASON FOR LOTOTO: _____

_____

List all Equipment Secured by the ECC device(s)	**Energy Verification/ Tryout**	**Name of Qualified Individual** (who isolated the energy source(s)	**Name of Qualified Individual** (who released the energy source(s)

ECC Signature: _____

Signature of New ECC if transferred: _____ _____ _____

_____ _____ _____

This should be signed only after the current ECC and the incoming ECC have had a "One on One" discussion to insure that all equipment listed on this form has been properly locked out, tagged out & tried out.

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Morenci Operations

Date: _____

WARNING!

If the equipment is not listed on the reverse side of this page, It is Not Locked Out!

Name (upon lockout)	Time of Lockout	Time of Release	Signature (upon release)	Comments (attach additional page if necessary)

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