CRITICAL LIFT WORKSHEET

PROJECT:_____DATE: _____ PREPARED BY:_____

1. CRANE DATA

1) Make & Model #_____
2) Unit #_____
3) Crane Type:_____
   _____Crawler mounted lattice boom _Carrier mounted lattice boom
   _____Grove telescope boom __Other _____ Boom Type_____
4) Lattice Boom Model & Type:
   _____Angle Chord _____Offset Tip
   _____Tubular Chord _____Tapered Tip
   _____Hammerhead
5) Boom Length _____ft.
6) Jib Model _____ Length _____
7) Counterweight_____lbs. Offset _____
8) Is the Crane working on Trestle? _____ Yes_____ No
   If Yes has the Engineering Department been contacted? _____ Yes _____No
   If No contact the Engineering Department to verify trestle is rate for Crane.

2. LOAD CAPACITY

Operating by the "seat of the pants" is very dangerous and will not be tolerated. Never use signs of tipping to determine if a load is within capacity. Either find out how much the load weighs and use the load chart or don't lift it at all.

9) Exact Load Weight_____ 9) Size of Load_____

10) Calculate Net Capacity

Net Capacity = Gross Capacity - Capacity Deductions

_____Lbs. Gross Capacity at_____ ft. radius
_____Lbs. Rigging Weight (i.e., shackles, slings, picking beams)
_____Lbs. Main Block
_____Lbs. “Effective" Jib Weight
_____Lbs. Cable
_____Lbs. Headache Ball
_____Lbs. Others_____
_____Lbs. Net Capacity vs. _____Lbs. Exact Load Weight

Net Capacity must be equal to or greater than exact load weight.

11) Maximum Load Radius ft. 13) Minimum Load Radius_____ft.
12) Maximum Boom Angle ° 14) Minimum Boom Angle_____°

3. RIGGING

15) _____Min. # parts of Hoist Line = Gross Capacity (*refer to load chart or calculate according to the formula on the back of page 1)*

16) Sling Construction: Dia. Inches_____ # Parts_____
Wire core/mechanical splice _____Fiber core/hand splice__
17) Number of Legs _____ 18) Sling Angle_____
19) Sling Capacity _____lbs. *(refer to charts on the back side)*
20) Means of Fastening Sling or Hoist Hook to Load_____
21) The capacity of Fastener, i.e., Shackle, Picking Eye, etc._____lbs.

4. <u>PRE-LIFT REQUIREMENTS</u> (*All must be answered YES.)*

22)____Load chart utilized is for exact cram model, boom type, & length
23)____The competent person in charge of lift: Name_____ Title_____
24)____The competent signal person identified: Name_____Title_____
25)____The competent rigging person identified: Name_____Tile_____
26)____Pre-pick meeting held with pick crew
27)____Written crane inspection completed within 14 days
28)____Swing path not over personnel
29)____Footing is sound
30)____Minimum clearances from power lines can and will be maintained
(Under 50 KV - 10' clearance --- Over 50 KV - See OSHA Standard)
31)____The load radius has been measured with a tape measure
32)____Wind speed does not exceed 30 mph. Some "sail" loads limited to 20 mph.
33)____A load will not touch boom in vertical lift
34)____For Dual Crane Lift, full compliance with "JB Dual Crane Lift Policy."
35)____If on a barge, the Project Manager has reviewed stability and potential list conditions
36)____Taglines are long enough, tied only to the load, and in good condition - loose cad controlled by designated pawn
37)____Operating locations are far enough away from shoring, excavations, and trenches to eliminate the risk of collapse
38)____Application of hardwood mats has been carefully considered
39)____Outriggers or crawler tracks are fully extended, and wheels are clear of the ground
40)____Application of blocking under outrigger pads has been carefully considered
41)_____Adequate swing clearance (minimum 2 feet) between the counterweight and any obstacles
42)____Boom composition is correct
43)____No added counterweight
44)____Crane is level and has been chocked with carpenter's level
45)____If the crane is not level within I°, the blue load chart is applicable.
When using the blue chart, the crane must not exceed 3° off level.
46)____Also, if the blue chart is used, has maximum boom length been carefully considered
47)____The machine is rigged with an adequate number of Parts of Hoist Line (#15 above)

APPROVAL SIGNATURES

PROJECT MANAGER: PROJECT SUPERINTENDENT

_____Date:_____ _____Date:_____