



## Appendix 13-B

### Pre-Operational Crane Inspection Report

<b>JOB NAME</b>		<b>JOB NUMBER</b>		<b>DATE</b>	
<b>TIME IN:</b>		<b>CRANE SUPPLIER:</b>			
<b>TIME OUT:</b>		<b>TYPE OF CRANE:</b>			
<b>OPERATOR NAME:</b>					

<b>MAXIMUM WEIGHT TO BE LIFTED</b>	<b>LIFT RADIUS</b>
<b>LOAD WEIGHT</b>	<b>MAXIMUM LIFT RADIUS</b>
<b>QUANTITY OF PICKS:</b>	

#### CHECKLIST ITEMS – Crane operator must complete checklist and initial each item

INSPECTED ITEMS	YES	NO	N/A	INITIAL
NCCO OPERATOR CERTIFIED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SIGNALER IS KNOWLEDGABLE OF PROPER SIGNALS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MODE OF COMMUNICATION HAS BEEN ESTABLISHED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
COMPETENT RIGGER ASSIGNED	<b>NAME:</b>			
CRANE INSPECTION REPORT PERFORMED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CERTIFICATE OF CURRENT LIABILITY INSURANCE PROVIDED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CONTROL & DRIVE MECHANISM (EXCESSIVE WEAR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CONTROL & DRIVE MECHANISM (WATER CONTAMINATION)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CONTROL & DRIVE MECHANISM (LUBRICANT CONTAMINATION)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CONTROL & DRIVE MECHANISM (FOREIGN MATTER)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BOOM ANGLE INDICATORS, BOOM STOP, BOOM KICKOUT DEVICES, ANTI-TWO BLOCK DEVICES, LOAD MOMENT INDICATORS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
LOAD CHART REVIEWED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AIR, HYDRAULIC & PRESSURIZED LINES CHECKED FOR DETERIORATION & LEAKAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HOOKS & LATCHES CHECKED FOR DEFORMATION, CHEMICAL DAMAGE, CRACKS & EXCESSIVE WEAR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
WIRE ROPE RIGGING MEETS MANUFACTURER SPECIFICATIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ELECTRICAL SYSTEMS CHECK FOR MALFUNCTIONS, DETERIORATION & EXCESSIVE MOISTURE & DIRT ACCUMULATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HYDRAULIC FUEL LEVEL CHECKED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TIRES CHECKED FOR PROPER INFLATION, EXCESSIVE WEAR & DAMAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>GROUND CONDITIONS</b>				
LEVEL & FLAT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
POTENTIAL FOR SETTING UNDER OUTRIGGERS CHECKED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GROUND WATER ACCUMULATION WILL NOT IMPACT LIFT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AREA CLEAR OF POWER LINES IN THE VICINITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AREA CLEAR OF OBSTRUCTIONS BETWEEN PICK POINT & DESTINATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
WEATHER CONDITIONS ADEQUATE FOR LIFT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>CRANE SETUP</b>				
LEVEL & STABLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
OUTRIGGERS FULLY EXTENDED ON ALL SIDES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TIRES COMPLETELY OFF OF GROUND SURFACES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
APPROPRIATE DISTANCE FROM TRENCHES/EXCAVATIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



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OUTRIGGER PADS APPROVED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>RIGGING</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>INITIAL</b>
ALL RIGGING VISUALLY INSPECTED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ALL DEFECTIVE OR DAMAGED RIGGING REMOVED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
COMPUTER IN APPROPRIATE OPERATING REMOVED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
APPROPRIATE PLACEMENT OF TAG LINE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PERSONNEL CLEAR OF PICK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>COMMENTS &amp; CORRECTIVE ACTIONS (ATTACH YOUR JHA)</b>				
<b>OPERATOR SIGNATURE</b>	<b>SITE SUPERVISOR NAME</b>	<b>SITE SUPERVISOR SIGNATURE</b>		