CRANE USE PLAN CHECKLIST

☐ 1. Narrative – Short written conceptual plan to include:
   a. What is being lifted
   b. Size/Weight
   c. Crane necessary
   d. When and where lift to occur, duration, etc.
   e. Include who needs to be notified and any coordination necessary

☐ 2. Contractor identified/marked Utility Locations and conducted Ground Compaction Tests for crane location

☐ 3. Calculations for load(s) based on:
   a. Crane Capacity
   b. Configuration(Loads, Rigging, and Pin Pressures)

☐ 4. Manual for crane to check:
   a. Calculations
   b. Manufacturers use recommendations
   c. Inspections required

☐ 5. Sketches (Overhead and Side) depicting:
   a. Lift
   b. Swing radius
   c. Swing direction
   d. Pedestrian/traffic control, etc.

☐ 6. Rigging Diagrams showing:
   a. Load
   b. Rigging
   c. Rigging angles
   d. Rigging calculations
CRANE USE PLAN CHECKLIST

☐ 7. ORF Crane Forms completed, reviewed and signed by all parties
   a. Crane Assembly/Disassembly and Lift Plan
      i. Check closely for any Critical Lift Requirements
         1. If any questions are answered yes, the details of the ORF Lift Plan must be closely followed
   b. Crane Permit
   c. Assembly/Lift Prep-Meeting

☐ 8. JHA/AHA(s) and daily STA/PTP for all associated activities
   a. Assembly of the Crane
   b. Lifting of the Loads
   c. Disassembly of the Crane

☐ 9. All Certifications - Current
   a. Complete Crane Inspection, (Third Party) not just cover sheet
   b. Operator Certs (NCCCO Card)
   c. Rigger Certs
   d. Signal Person Certs

☐ 10. Specific Traffic control plan if necessary
   a. Include vehicular and pedestrian traffic where applicable

☐ 11. Secondary Crane required for assembly of Primary Crane?
   a. Repeat steps 2-10 and include its use in step 1

☐ 12. The contents of the checklist must be reviewed by Division of Occupational Health and Safety, Technical Assistance Branch (DOHS/TAB)

DATE: ________________________ LOCATION: ____________________________________________
VERIFIED BY:
(Sign) ________________________ (Print) ____________________________________________