

Instructions

1. The Crane Use Planning Process has two parts:
 - ✓ **Crane Lift Plan**
 - ✓ **Crane Daily Safety Review**
2. A Crane Lift Plan is required for every crane lift on a Dimeo project – see OSHA Subpart CC for definition of crane.
3. Critical crane lifts, if authorized, may have to be reviewed by a professional engineer (the contractor shall budget for the PE review) – see page 2, section 2 of the Crane Lift Plan for a list of critical lifts.
4. Crane Lift Plans must be submitted at least 48 hours (2 business days) prior to crane mobilization – 5 days for critical and helicopter lifts.
5. Crane Lift Plans must be based on worst case % of capacity (i.e. gross deductions / chart capacity) for each specific crane configuration and location and activity (for example: unload a delivery truck is a separate activity from erecting steel).
6. The Crane Lift Plan may be valid for more than one day, as long as the configuration, location, and parameters used for developing “worst case” condition have not changed. Use multiple lift plans for multiple locations.
7. All rigging devices *MUST* bear the name of the manufacturer and identify WLL and be certified as to their capacity. Custom-fabricated devices (lifting beams, spreader bars, etc) may be acceptable with proper PE stamp or proof testing as required by applicable standards. Capacities shall be marked and legible on all such devices.
8. Work that is not anticipated in the Crane Lift Plan, but may arise due to site conditions (moving equipment, loading materials onto floors, etc) must be reviewed with Dimeo in advance. Changes affecting crane configuration and / or location may require the Crane Lift Plan to be amended.
9. The subcontractor is responsible to visit the site prior to the lift date to review crane setup location and documentary information pertaining to the site, which is maintained by Dimeo. This information is also provided as part of the construction documents. The subcontractor is responsible (determining adequacy, supplying and installing) for all supporting material (as defined within 29 CFR 1926.1402) necessary for the crane lift.
10. The Subcontractor is responsible to obtain all information that is necessary to develop a power line safety plan.
11. The Subcontractor is responsible to train all personnel involved in the use of the crane, for example: Rigging, Signaling, Crane Operation and Assembly / Disassembly.
12. **The Subcontractor must provide the following information along with the Crane Lift Plan:**
 - Competent person designation forms for Rigger, Signal Person
 - Rigger and Signal Person training certification, OSHA 10 cards.
 - Jurisdictional Registration, for example: FAA permit,
 - JHA for truck load /unload, boom conflicts, public protection, Etc.
 - JHA for power line encroachment
 - Logistics plan
 - Weight of material – bill of lading, calculation, manufacturers product data sheet, etc.
 - Rigging plan
13. **The Crane Company must provide the following information as a supplement to the Crane Lift Plan:**
 - Competent / qualified person designation forms for operator and A/D supervisor
 - Worker credentials – license, medical certification, OSHA 10 cards
 - Load chart (complete with notes)
 - Range chart
 - Dimension illustration and specifications for crane
 - Lightning and wind restrictions (from operators manual)
 - Crane dimensions and area (quadrant) of operation diagram
 - Provide copy of annual 3rd party inspection certification and report – see Crane Lift Plan for requirements (Note: The inspector shall be certified with the CCAA – see www.CCAAweb.net local resources)
 - Scaled site plan and elevation drawings
 - JHA for Assembly/Disassembly of crane and severe weather
 - Jurisdictional Registration, for example: State of CT Fire Marshal Annual Registration
14. The crane activity shall comply with the Site Specific Safety & Loss Control Program (SSS&LCP).

No warranty or certification of the suitability of this plan is provided by Dimeo. It is the responsibility of the Subcontractor and Crane Contractor to ensure that they and their employees are qualified, competent, properly equipped and properly trained to perform the activities outlined in this plan. Further, to ensure that the equipment (i.e. crane and rigging) is inspected and utilized in accordance with this plan and in a manner that complies with OSHA and the manufacturer operator's manual, for example.



Crane Lift Plan

Form No. 5.068 A

1. Lift Plan Responsible Persons				
Project Name:		Date of Lift:	Lift Location:	
Subcontractor's Name:				
Contact Name:	Contact Number:	Rigger ID:	Signal Person ID:	
Crane Company's Name:				
Contact Name:	Contact Number:	Operator ID:	A/D Supervisor ID:	
2. Crane Information				
Make:		Model:	S/N:	Capacity (tons):
Date Manufactured:	Does lift involve (if any box is checked, lift is critical)?	<input type="checkbox"/> ≥75% chart capacity <input type="checkbox"/> Dual crane <input type="checkbox"/> Personnel basket	<input type="checkbox"/> Two hooks <input type="checkbox"/> Traveling with Load <input type="checkbox"/> Other (refer scope)	<input type="checkbox"/> Over public space <input type="checkbox"/> Tripping load
Carrier Information		Boom Information		Jib Information
<input type="checkbox"/> Truck <input type="checkbox"/> Rough Terrain <input type="checkbox"/> All Terrain <input type="checkbox"/> Crawler Block <input type="checkbox"/> Other	<input type="checkbox"/> Telescoping <input type="checkbox"/> Lattice Block capacity (tons) # of Parts Line: Line Pull (lbs) Working Boom Length (ft):	Jib deployed? <input type="checkbox"/> No <input type="checkbox"/> Yes – is it Block capacity (tons) # of Parts Line: Line Pull (lbs): Jib length (ft):	<input type="checkbox"/> Fixed or <input type="checkbox"/> Luffing Offset: ° Boom and Jib - Combined Length (ft):	
Power Line Encroachment Review			FAA Permit Review	
Max working radius (ft):	plus ½ length of load (ft):	Max working boom tip elevation (as assembled) in ft:		
Will max working radius (plus ½ length of load) be within 20' of an overhead power line?		Will max vertical boom elevation exceed 200' above existing site elevation?		
<input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> No <input type="checkbox"/> Yes		
If yes, provide power line voltage:		If yes, provide FAA permit no.:		
If yes, provide power line safety JHA - see OSHA subpart CC				
Outrigger Configuration / Distributed Load				
<input type="checkbox"/> Fully Extended <input type="checkbox"/> Fully Retracted <input type="checkbox"/> Intermediate <input type="checkbox"/> Rubber (PSI)?		Crane cribbing dimensions?		
		Distributed Ground Bearing Pressure (PSF)?		
Crane Condition				
Was crane idle >3 months since annual inspection?	Is crane a lattice boom?	Note regarding 3 rd party inspection: If crane has been idle for longer than 3 months since last 3 rd party annual inspection (inspection), or if crane being A/D is a lattice boom a new inspection certification and report must be provided post A/D. Exception: hydraulic crane with stowed jib that was included in the current annual 3 rd party inspection. Inspector must be certified with CCAA (www.CCAAweb.net).		
<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes			
3. Itemization of Crane Chart and Load Deductions				
Weight of Heaviest Load (lbs):		Comment:		
Rigging (lbs):		Comment:		
Jib (lbs):		Comment:		
Jib Hook (lbs):		Comment:		
Hook Block (lbs):		Comment:		
Load Line (lbs):		Comment:		
Other (lbs):		Comment:		
Gross Deductions (lbs):		Comment:		
4. Lift Summary				
Max Working Radius	Boom Angle	Gross Deductions	Chart Capacity	% of Capacity (Gross Deductions / Chart Capacity)

5. Load Characteristics	
Will this crane lift plan cover multiple picks?	<input type="checkbox"/> No <input type="checkbox"/> Yes - explain:
Description of load(s) creating highest % of capacity (i.e. worst case load):	
Dimensions of load(s) creating highest % of capacity (height x width x length): <input type="checkbox"/> Other dimensions, as follows:	
Weight of load creating highest % of capacity (lbs)? <input type="checkbox"/> Calculation provided with rigging diagram <input type="checkbox"/> Manufacturer product data sheet provided	
How will the Center of Gravity (COG) of the load be determined? <input type="checkbox"/> Manufacturer data sheet – see attached <input type="checkbox"/> Calculation – see attached <input type="checkbox"/> In Field – explain below:	

Will any load be upended? No Yes (If yes, provide stability evaluation from manufacturer or PE)

6. Rigging Information:	
List rigging components - be specific: manufacturer, number of pieces, description, size, length, capacity and component weight (NOTE: Job built equipment must be engineered and proof tested per OSHA 29 CFR 1926.251(a)(4)).	

Identify the minimum capacity component:	Capacity (lbs)?
Rigging diagram	<input type="checkbox"/> see attached

7. Crane Location/Clearances	
a. Provide a to-scale plot plan showing crane location, adjacent buildings, pipe racks, and other significant obstructions within load swing radius. Indicate direction and span of swing	<input type="checkbox"/> see attached
b. Provide a to-scale elevation plan depicting crane, adjacent structures, and load	<input type="checkbox"/> see attached
c. What is the horizontal distance from the crane center pin to the nearest structure?	ft.
d. What is the minimum clearance from boom to highest point of structure during a pick?	ft.
e. What is the minimum clearance from load to highest point of structure during a pick?	ft.
f. What is the minimum distance from boom to load during a pick?	ft.
g. Has site been reviewed (actual and documentary information) as part of the development of this crane lift? <input type="checkbox"/> Yes (and, no further information required) <input type="checkbox"/> Yes (and, the following add'l information requested):	
h. Will the crane setup (or load) area be within zone of influence of foundation or underground facility? <input type="checkbox"/> No <input type="checkbox"/> Yes - explain what additional measures will be taken to establish proper support for crane:	
j. Describe signaling method: <input type="checkbox"/> Hand <input type="checkbox"/> Voice <input type="checkbox"/> Voice with hands free radio for operator <input type="checkbox"/> Other – explain:	

❖ Non-compliance with any part of this Crane Lift Plan will be grounds for immediate cessation of work and possible permanent removal from the site.

❖

Signatures	
Crane Company Responsible Person Signature:	Subcontractor Responsible Person Signature:

Submit this Completed form to your Dimeo Representative 48 hours (5 days for critical lift) prior to any crane mobilization.



Daily Crane Safety Review

Form No. 5.068 A

A suitable Daily Inspection Form may be substituted by the Crane Operator.

Date of Safety Review:	
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Crane Information

Make		Model		S/N	
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The Following Items are in the Crane Cab:

<input type="checkbox"/> Operators Manual including load chart and notes	<input type="checkbox"/> FAA permit and / or CT registration, if applicable	<input type="checkbox"/> Weather report	<input type="checkbox"/> 3 rd party annual inspection report	<input type="checkbox"/> Completed daily inspection sheet, last three monthly inspection reports
<input type="checkbox"/> Copy of Crane Lift Plan	<input type="checkbox"/> Fire Extinguisher	<input type="checkbox"/> Equipment modification inspection completed, if applicable – see 29 CFR 1926.1412 (a) for requirements	<input type="checkbox"/> Post assembly inspection completed – see 29 CFR 1926.1412 (c) for requirements	<input type="checkbox"/> Copies of last three monthly inspection reports – see 29 CFR 1926.1412 (e) for requirements

Check the Following to ensure adequacy of condition and function:

<input type="checkbox"/> Control mechanisms	<input type="checkbox"/> Control and drive mechanisms	<input type="checkbox"/> Air, hydraulic, and other pressurized lines.	<input type="checkbox"/> Hydraulic system – fluid levels	<input type="checkbox"/> Hooks and latches
<input type="checkbox"/> No broken or fogged glass	<input type="checkbox"/> Tires – condition and inflation	<input type="checkbox"/> Wedge Socket/Becket Properly Installed	<input type="checkbox"/> Ground conditions – under outriggers / supporting foundation, ground water accumulation	
<input type="checkbox"/> Wire rope reeving	<input type="checkbox"/> Wire rope – see 29 CFR 1926.1413 for requirements	<input type="checkbox"/> Electrical system	<input type="checkbox"/> Degree of level position is within tolerances specified by chart notes – pre and post shift and following each move	
<input type="checkbox"/> Hydraulic outrigger and stabilizer jacks – integral holding system	<input type="checkbox"/> Boom Angle Indicator	<input type="checkbox"/> Boom stops (lattice boom crane)	<input type="checkbox"/> Jib stops – if jib is deployed	<input type="checkbox"/> Horn
<input type="checkbox"/> Foot pedal locks, if applicable	<input type="checkbox"/> Crane level indicator	<input type="checkbox"/> Hand signal chart posted	<input type="checkbox"/> FAA markings, if required	<input type="checkbox"/> Warning decals
<input type="checkbox"/> Swing radius barricade	<input type="checkbox"/> Boom hoist limiting device	<input type="checkbox"/> LMI	<input type="checkbox"/> Potential conflicts with other booms have been mitigated through JHA	
<input type="checkbox"/> Backup / travel alarm working	<input type="checkbox"/> Anti-two Block Operational	<input type="checkbox"/> Brake test – load >90% of line pull	<input type="checkbox"/>	<input type="checkbox"/>

Confirm the following additional items:

<input type="checkbox"/> Crane Configuration is per Crane Lift Plan	<input type="checkbox"/> Crane operating parameters (radius, load, location, etc.) is per Crane Lift Plan	<input type="checkbox"/> Voice communication – hands free required for radio	<input type="checkbox"/> Visual communication – line of site	<input type="checkbox"/> Taglines in Use
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Overhead load hazard exposure to other workers (except essential to load handling) has been mitigated through JHA

Notes:

Name of operator conducting safety review:	Operators Signature:
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