



# LIFTING CERTIFICATE

PERMIT HOLDER	1021	Ref. WP #	Permit Holder		Date	
	Other Certificates/ supporting documents	<input type="checkbox"/> Confined Space Entry	<input type="checkbox"/> Electrical	<input type="checkbox"/> Lift Plan (sketch on reverse page)	Estimated Time of Completion: _____	
		<input type="checkbox"/> Hot Work	<input type="checkbox"/> LOTO	<input type="checkbox"/> Traffic management plan		<input type="checkbox"/> Rescue plan
		<input type="checkbox"/> Excavation	<input type="checkbox"/> Working at height	<input type="checkbox"/> Emergency response plan		<input type="checkbox"/> Others
	Work Location		Equipment ID			
	Work Description	Crane Operator				
		Lift Supervisor				
		Dogman/Rigger				
	CRANE INFORMATION					
	Type of crane		Crane capacity (SWL)		Crane Certification No.	
		SWL of crane attachments/slings				
PERMIT ISSUER	ACTIVITY DETAILS					
	Location of lift	A - Lift weight (Kg) (weight of item being lifted)		B - Total weight of lifting equipment (Kg) (slings, shackles etc)		
	Maximum lift radius (m)	C - Combined total lift weight (Kg) (A+B)				
	D - Chart capacity at lift radius ( Kg)	E - Percentage of chart capacity (C/Dx100)		NOTE: Over 70% of maximum lift capacity at radius requires SPI approval		
			%			
CONTROLS (Permit Issuer to check required controls and then initial once controls are in place)						
	Req'd	Confirmed				
	<input type="checkbox"/>	_____	Communications between the Crane Driver and the Dogman has been agreed			
	<input type="checkbox"/>	_____	Add type: _____			
	<input type="checkbox"/>	_____	Check the ground stability			
	<input type="checkbox"/>	_____	Check for underground services			
	<input type="checkbox"/>	_____	Confirm crane SWL, position and access when lifting			
	<input type="checkbox"/>	_____	Check the crane lift and swing arc is outside overhead services permissible distances and other overhead hazards			
	<input type="checkbox"/>	_____	The crane, slings, shackles and other lifting equipment must have their SWL identified			
	<input type="checkbox"/>	_____	All lifting equipment must have a tag of the current date of last load test carried out by a competent person			
	<input type="checkbox"/>	_____	Check weather conditions are suitable for the entire works completion. DO NOT proceed if it may endanger the stability of the crane (max windspeed 9.8m/s or 35.2km/h)			
	<input type="checkbox"/>	_____	When the crane is unattended the operator must ensure that no load is suspended			
	<input type="checkbox"/>	_____	When using mancages, refer to working at height SWP			
	<input type="checkbox"/>	_____	Crane operator's competency is to be verified prior to work starting			
	<input type="checkbox"/>	_____	Rigger/Dogman competency verified			
	<input type="checkbox"/>	_____	Prestart inspection is conducted and recorded for crane, attachments and lifting equipment			
	<input type="checkbox"/>	_____	Check complete setup of crane and attachments for safe lift prior to lift			
	<input type="checkbox"/>	_____	Ensure tag lines on the load are secure and workers are clear of suspended load			
	<input type="checkbox"/>	_____	Ensure all workers/staff/public are clear of swing arcs and fall risks prior to and during the lift			
	<input type="checkbox"/>	_____	Install and maintain an appropriate exclusion zone around the lift area			
APPROVAL	APPROVAL TO START WORK					
	I certify that I have reviewed the proposed work and I am satisfied that it is adequately described on the Work Permit and that the controls detailed in this certificate are adequate and clearly defined.					
	Permit Holder:		Signature:	Date: Time:		
	I certify that I am aware of the planned work and the controls detailed on the Work Permit and will ensure that work only proceeds when all the conditions set out in the documentation are met.					
	Permit Issuer:		Signature:	Date: Time:		
CLOSE OUT	CLOSE OUT					
	The lifting work has been completed and the work area restored to the original condition					
	Permit Holder:		Signature:	Date: Time:		
	I have checked the worksite and confirmed that the lifting work has been completed.					
	Permit Issuer:		Signature:	Date: Time:		

**LIFT SKETCH (draw here or attached if provided by crane operator)**

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**LIFT SKETCH**