Standard Lift Plan In accordance with EM 385-1-1, Section 16 **US Army Corps of Engineers** 10/12/2016

New England District-Standard Lift Plan

Da	te: Job: Location:										
Tin	Time: Completed By (Competent Person):										
No low	ote: Applies to Cranes, Derricks, Hoists and Power-Operated equipment that can be used to hower and/or horizontally move a suspended load (includes excavators, forklifts, Rough Terrain uipment, etc., when used with rigging).	oist,									
Cra	ane Considerations	Yes	No								
1	The lifts within the crane's rated capacities? (based on the boom height & radius)										
2	A copy of the load chart and operating manual will be kept in the crane's cab?										
3	Have all potential crane boom obstructions been identified?										
4	Have environmental considerations been addressed? (wind, weather, lightning)										
5	Have electrical hazards been addressed (overhead /underground)										
	- Clearance distances established?										
	Is a spotter required?Public Utility contact required?										
6	Crane swing radius properly barricaded and travel paths are cordoned off??										
	Comments:										
Cra	ane Considerations	Yes	No								
1	Weights and Centers of Gravity have been determined and load contents are secured?	165	INO								
2	Ground is stable and suitable for anticipated ground bearing pressures?										
3	. 0										
4											
5	Attachment points are rated to take load weight? Are the loads structurally capable of being lifted? (bending/twisting issues)										
6	Are the loads structurally capable of being lifted? (bending/twisting issues)										
7	Are the loads structurally capable of being lifted? (bending/twisting issues) The crane is equipped with a load weighing device or equivalent? (Example: LMI)										
8	Are the loads structurally capable of being lifted? (bending/twisting issues) The crane is equipped with a load weighing device or equivalent? (Example: LMI) Documentation of the wire rope's working load limit (WLL) has been submitted?										
J	Are the loads structurally capable of being lifted? (bending/twisting issues) The crane is equipped with a load weighing device or equivalent? (Example: LMI) Documentation of the wire rope's working load limit (WLL) has been submitted? The crane's specification/technical data sheets have been submitted? (PDF copy preferred.)										
<u> </u>	Are the loads structurally capable of being lifted? (bending/twisting issues) The crane is equipped with a load weighing device or equivalent? (Example: LMI) Documentation of the wire rope's working load limit (WLL) has been submitted?										

Rig	ging	Yes	No
1	All rigging has been inspected by a Qualified Rigger?		
2	Have sling angles been calculated and shackles are correctly sized?		
3	Blocking or cribbing is available to set loads on, to prevent damage to the load and rigging?		
4	Rigging has been protected from all sharp edges?		
	Comments:		
Pei	rsonnel/Lift Preparation	Yes	No
1	The roles, responsibilities and certifications/qualifications for personnel have been submitted and approved? (Operator, Rigger, and Signal Person)		
2	A Pre-Lift meeting will be (or has been) conducted?		
3	Have employees been designated in writing by their employer? (See attached templates)		
		<u> </u>	
	ea/Crane Preparation	Yes	No
1	The locations for the load landings have been selected and prepared?		
2	Annual inspection info (or after last load bearing component repair) is posted on crane?		
3	Initial operational testing has been completed & documented per EM 385 Section 16.F.02?		
4	LHE has safety/operational equipment in accordance with EM 385-1-1, Section 16.E		
5	Shift inspections will be conducted and documented at the begining of each shift? Comments:		
	Confinents.		
	Crane Operator: Date:		
	Rigger(s): Date:	_	
	Signal Person: Date:		
	Other: Date:		

This document meets the requirements of EM 385-1-1, Section 16.B.01 for LHE/Crane Operators ;
designates, as a
qualified crane/LHE operator. They have the necessary knowledge, certifications and
medical clearances to meet the requirements of EM 385-1-1, Section 16.B and are
approved to work on USACE projects.
Crane/LHE Operator Certification:
Operator is designated to operator the following LHE:

Company Official/Supervisor Signature

Crane Operator Medical Clearance

This form provides guidance to the Physician and verification of U.S. Army Corps of Engineers crane operator physical qualification/examination requirements. It does not replace any of the crane operator requirements in EM 385-1-1.

Date of Examination:	
Crane Company/Employer Name:	Phone:
This is to certify that examination and meets the Crane Operator Physical Quathe U.S. Army Corps of Engineers EM 385-1-1 (30 Nov 1	alification/Examination Requirements set forth in
MD DO	
Physician's Signature and Title (Must be a MD or DO)	Name (Print) and Phone No.

Note: A DOT Medical Examiners Certificate in accordance with the Federal Motor Carrier Regulation (49 CFR 391.41-391.49) does not meet the EM 381-1-1 crane operator physical requirements.

EM 385-1-1 Crane Operator Physical Qualification/Examination Requirements:

- a. Operators shall have a current physician's certification, dated within the past 2 years, that states the operator meets the following physical qualifications:
- (1) Vision of at least 20/30 Snellen in one eye and 20/50 in the other, with or without corrective lenses;
- (2) Normal depth perception and field of vision;
- (3) Ability to distinguish colors, regardless of position;
- (4) Adequate hearing, with or without hearing aid, for the specific operation;
- (5) Sufficient strength, endurance, agility, coordination, manual dexterity, and speed of reaction to meet the demands of equipment operation;
- (6) No evidence that the operator is subject to seizures or loss of physical control. If evidence of this nature is found, it may be sufficient cause for disqualification. In such cases, specialized medical tests may be required to evaluate these conditions and determine their impact;
- (7) No evidence of physical, emotional or psychological limitations that could result in a hazard to the operator, or that in the opinion of the examiner could interfere with the operator's performance. If evidence of this nature is found, it may be sufficient cause for disqualification. Specialized medical tests may be required to determine these conditions.
- b. Deviations from Physical Qualification Requirements. (See Page 2)
- c. All contractor crane/derrick operators shall participate in a drug testing program and have a negative result for a substance abuse test. The level of testing will be in accordance with standard practices for industry or by the agency's random drug testing program. This test will be confirmed by a recognized laboratory service.

Note: Crane operators must refer to the EM 385-1-1 for all crane operator qualification requirements.

Crane Operator Medical Clearance

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- b. Deviations from Physical Qualification Requirements.
- (1) Deviations from the physical requirements are not necessarily totally disqualifying.
- (2) However, where such deviations exist, competent medical and management authorities shall give special consideration to each individual case and may recommend waivers.
- (3) Waivers may be approved by the local Safety and Occupational Health office (SOHO) and must be re-issued every 2 years, based on results of operator's medical clearance examination. A copy shall be provided to HQ, SOHO.
- (4) Normally, waivers shall not be granted for applicants who have never before established operator qualifications. However, an evaluation on an individual basis shall be made per the above requirements. Any limitations identified shall be noted on the operator's license and license record.

Comments:

Note: Crane operators must refer to the EM 385-1-1 for all crane operator qualification requirements.

This document meets the requirements of EM 385-1-1, Section 15.B for Quality	fied Riggers;
designates	<u>,</u> as a
Qualified Rigger. He/She is over the age of 18 and has knowledge, training, ar	nd
experience to meet the requirements listed in EM 385-1-1, Section 15.B.01 & 1	15.B.02
Rigger is approved for the following rigging activities:	
Company Official/Supervisor Signature	

This document meets the requirements of EM 385-1-1, Section 16.B.06 for a Signal Person ;											
, has been trained and evaluated by a Qualified Evaluator on											
how to properly signal a LHE Operator with () signals.											
He/She has the basic understanding of crane operations/limitations and has demonstrated they											
meet all the requirements of Section 16.B.06 through a written and practical test.											
Documentation of Signal Person's Training:											
Company Official/Supervisor Signature											

FORM 16-1

Certificate of Compliance for LHE and Rigging

This form is applicable to all Contractor Load Handling Equipment (LHE) and Rigging Gear being brought onto the project site and applies to all cranes, derricks and any other hoisting equipment used to lift suspended loads.

This certificate shall be signed by an official of the company that provides LHE/cranes and rigging gear for any application under this contract.

and figging gear for any application under this contract.	
Contracting Officer's Point of Contact: (Government Designated Representative)	Phone #:
Prime Contractor/Phone #:	Contract Number:
SSHO/QC:	Phone #:
LHE Manufacturer/Type/Capacity:	
LHE Operator(s) Name(s):	
I certify that:	
 The above noted LHE and all rigging gear conform to the E OSHA regulations (host country regulations in foreign countries standards. 	
2. The operator(s) noted above has been trained, qualified ar accordance with the requirements in Section 16, EM 385-1-1 fabove noted LHE.	
3. The operator(s) noted above has been trained not to bypas LHE operations.	
4. The operator(s), rigger(s) and company official (staff) are a	
notification to the GDA of any incident or accident involving the	s equipment is required.
Company Official Signature:	Date:

Post on Crane/LHE.

Company Official Name/Title:

(In Cab and Contractor's Office for each LHE brought onto USACE Project/Property)

Critical Lift Plan This plan is required for lifts meeting the critia listed in EM 385-1-1, Section 16.H

US Army Corps of Engineers

10/12/2016

New England District CRITICAL LIFT PLAN

	For use	of this form, s	ee EM 385-1	-1, Sec	tion 16. Proponent is Crane HHWG.								
Date:					Prepared By:								
Location:					USACE District:								
include: lifts made whe or placed out of the oper	re the load we rator's view ; l	eight is greate ifts made wit	er than 75% o h more than	of the ro	I planning and additional or unusual safe ated capacity of the crane; lifts which req ane; lifts involving non-routine/technically ch the crane operator believes should be	uire load to be y difficult riggi	e lifted						
A. TOTAL LOAD				_	E. CRANE PLACEMENT (Mobile	Cranes Only)							
1. Load Weight				lbs	Maximum Bearing Pressure			PSF					
2. Wt. of Aux. Block				lbs	Note: Bearing Pressure Calculations must be attached	ed on Page 3.							
3. Wt. of Main Block				lbs	2. Ground Conditions Suitable f	_		YES / NO					
4. Wt. of Lifting Bean	n			lbs	Note: Ground Condition Calculations must be attached	ed on Page 3.							
5. Wt. of Sling/Shack	des			lbs	3. High Voltage or Electrical Ha	-		YES / NO					
6. Wt. of Jib/Ext. (ered	cted/stowed)			lbs	Note: If Electrical Hazards are present they must be	shown on Page 4.							
7. Wt. of Hoist Rope				lbs	4. Obstructions to Lift or Swing			YES / NO					
8. Other:				lbs	Note: If Obstructions are present they must be shown	n on Page 4.							
TOTAL	_ WEIGHT				5. Travel with Load Required?	-		YES / NO					
Note: Source of load weight (Drawin	ngs, Calcs, etc.) m	ust be attached or	Page 2.		6. Other?								
B. CRANE					F. OPERATOR QUALIFICATION	NS .							
1. Type of Crane				_	Certified Operator?	-		YES / NO					
2. Maximum Crane C	apacity			lbs.	2. Option?	-							
3. Radius (Maximum)				_ft.	3. Certified for Type, Class & C	apacity?		YES / NO					
4. Radius (Minimum)				ft.	4. Designated in writing by emp	loyer:		YES / NO					
5. Boom Length (Max	rimum)			_ft.	G. PRE-LIFT CHECKLIST	(YES)	N/A	(NO)					
6. Boom Length (Mini	mum)			_ft.	Crane Inspected								
7. Crane Capacity (M	lax Radius)			lbs.	2. Rigging Inspected								
8. Crane Capacity (M	lin Radius)			lbs.	3. Crane Set-up								
9. Boom Angle (Maxir	mum)			_deg.	4. Overhead Hazard Check								
10. Boom Angle (Minin	num)			_deg.	5. Swing Check								
11. Gross Load of Cra	-			lbs.	6. Counterweight Check								
12. Lift is		rane's rated	d capacity		7. Operator Qualifications								
13. If Jib/Ext. is to be	used:				8. Signal Person Qualifications								
	Length			_ft.	Rigger Qualifications								
	Offset			_ft.	10. Load Chart in Crane								
14. Rated Capacity of	Jib/Ext.			lbs	11. Load Test								
C. HOIST ROPE	Main	Aux 1	Aux 2		12. Tag Lines								
1. # of Parts					13. Wind Conditions								
2. Rope Diameter					14. Traffic Hazard Check								
3. Working Load Limit					15. Site Control								
D. RIGGING					16. Signatures								
1. Hitch Type(s)					H. SIGNATURES								
2. No. of Slings:		Size:			Crane Operator								
3. Sling Type:					2. Rigger								
4. Sling Assembly Ca	apacity:			lbs.									
5. Shackle Size(s):					4. Lift Supervisor								
6. Shackle Rated Ca	pacity(s)			lbs.									
					6. Other								

New England District CRITICAL LIFT PLAN

For use of this form, see EM 385-1-1, Section 16. Proponent agency is Crane HHWG.

LOAD CALCULATIONS Show here or attach calculations, drawings, etc.

New England District CRITICAL LIFT PLAN

For use of this form, see EM 385-1-1, Section 16. Proponent agency is Crane HHWG.

BEARING PRESSURES & GROUND CONDITIONS Show here or attach calculations, drawings, etc.

New England District CRITICAL LIFT PLAN

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Sho	w h	ere d	or at	tach	site	plan	and	seq	uen	cing											