LATTICE BOOM LIFT PLANNING WORKSHEET

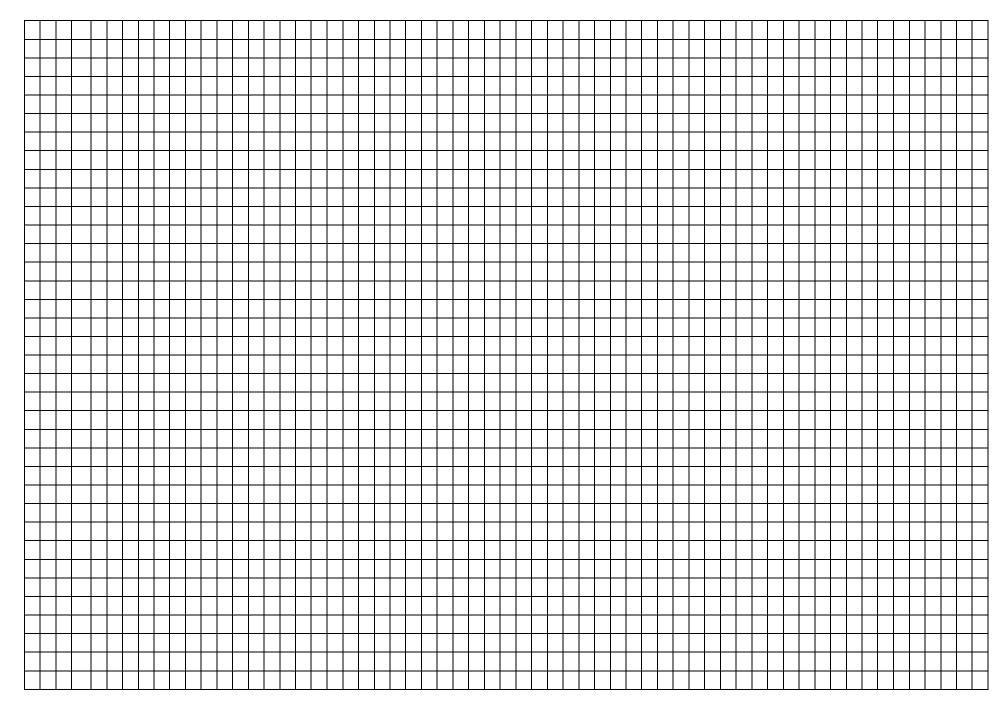


Job Number:	Date:	RIGGING COMPONENTS
Job Description:	Lift Plan Prepared by:	Sling Type: ☐ Wire Rope ☐ Synthetic Web ☐ Synthetic Round ☐ Alloy Chair
Location of Lift:	Crane Serial Number:	Sling Size: Length: Weight: Capacity:
Operator Name:		Angles: Have sling angles below 45° been eliminated? ☐ Yes ☐ N
Crane Owner:	Contact Borcon:	Shackles Size: Shackle Weight: Capacity:
Weight of the Load Information Provided by:		
rane Selection (size your crane) 1	Crane Setup Diagram (use back of form) Soil conditions (explain type and size) of mats or blocking	LIFT INFORMATION Weight of Load:
LARGER SZE DAGRANS AVALABLE — CONTACT BRAILER — \$6607-1 ³		Below ground hazards identified and located:
Prepared by:		
Operator:	Signature:	Total Weight to be Lifted: lbs. ÷ Capacity from Chart =
Craft Supervisor:	Signature:	What is the maximum wind speed to be allowed:
Date:		Date of pre-lift planning meeting:
Lift Supervisor:	Signature:	Crew performing work on:
Project Mngr./Supt.:	 Signature:	*Date plan submitted to crane superintendent/safety:
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LIFTS EXCEEDING 90% OF RATED CAPACITY MUST COMPLY WITH THE ADDITIONAL REQUIREMENTS OF AN ENGINEERED LIFT (STEEL WORK MUST BE LESS THAN 75% OF RATED CAPACITY).

LATTICE BOOM LIFT PLANNING WORKSHEET





HYDRAULIC LIFT PLANNING WORKSHEET

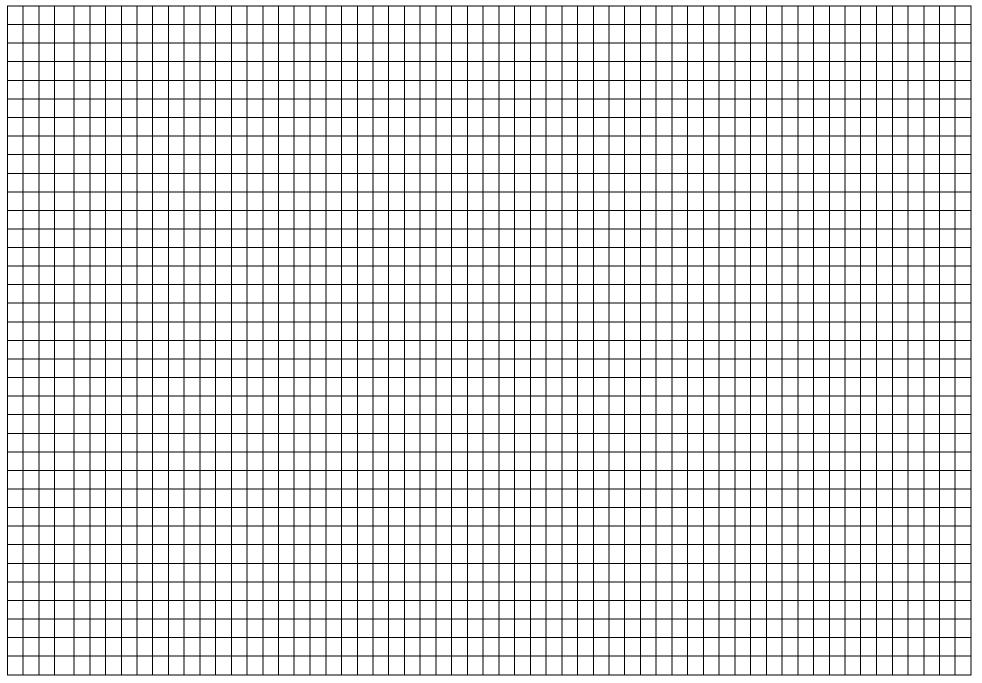


Job Number:	Date:	RIGGING COMPONENTS	
Job Description:	Lift Plan Prepared by:		ic Web Synthetic Round Alloy Chain
Location of Lift:	Crane Serial Number:	Sling Size: Length:	Weight: Capacity:
Operator Name:	Crane Model:		below 45° been eliminated? \square Yes $\ \square$ No
Crane Owner:	Contact Person:	Shackles Size: Shackle W	eight: Capacity:
	Contact Person.		
Weight of the Load Information Provided by:		LIFT INFORMATION	
SKETCH LAYOUT IN REFERNCING TO BUILD	DING, RADIUS, LAYDOWN, UTILTIES ON BACK	Weight of Load:	lbs
	oil conditions (explain type and size) of mats or blocking	Allowance for Extra Weight (scale,	
VORKING RANGE DIAGRAM	on conditions (explain type and size) of mats of blocking	sludge, internals, liquid, etc.)	lbs
(BOOM DEFLECTION NOT SHOWN) D6-829-008229		Weight of the Rigging:	lbs.
170		Weight of the Block:	lbs.
160 30 44		Weight of the Head Ache Ball:	lbs.
H 140		Weight of Spreader: Weight of Jib:	lbs. lbs.
Z 130		Weight of Hoist Line:	lbs.
g 120 60.		Weight of Attachments:	lbs.
50.		TOTAL WEIGHT TO BE LIFTED:	lbs.
90 40.		Max. Radius to be Used:	ft.
\$ 80 74 E		Boom Length:	ft.
70		Jib Length:	ft.
50 20.		Boom Angle:	degrees
40 - 34		Jib Offset	
30 76° MAX BOOM R	igging Diagram (use back of form if necessary)	On Out Riggers:	☐ Yes ☐ No _ If yes, 0, 50, 100%
10 0 ANGLE		On Crawlers:	☐ Extended ☐ Retracted
0 130 110 90 70 50 30 10 AXIS OF		On Tires:	☐ Yes ☐ No
130 110 90 - 70 50 30 10 \(\sum_{\text{AXIS}} \) OF 120 100 80 60 40 20 ROTATION OPERATING RADIUS IN FEET FROM AXIS OF ROTATION		Blocking or Crane Mats Used:	☐ Yes ☐ No What size:
DIMENSIONS ARE FOR LARGEST GROVE FURNISHED		Counterweight:	lbs.
3'-6' HOOK BLOCK AND HEADACHE BALL, VITH ANTI-TWO BLOCK ACTIVATED.		Lift Over:	☐ Front ☐ Side ☐ Rear ☐ 360°
The State Second No. 1 Miles		Est. Clearance between boom and su	rrounding utilities: ft.
		Below ground hazards identified and	
Prepared by:	Signature:	Capacity from Chart:	lbs.
Operator:	Signature:	Tatal Waisht to be Lifted.	. Consoits from Chart
Craft Supervisor:	Signature:		. ÷ Capacity from Chart =% be allowed:
Date:		what is the maximum wind speed to	be allowed.
1:0.6	 Signature:	Date of pre-lift planning meeting:	
· ————————————————————————————————————		Crew performing work on:	
Project Mngr./Supt.:	Signature:	*Date plan submitted to crane superin	tendent/safety:

LIFTS EXCEEDING 90% OF RATED CAPACITY MUST COMPLY WITH THE ADDITIONAL REQUIREMENTS OF AN ENGINEERED LIFT (STEEL WORK MUST BE LESS THAN 75% OF RATED CAPACITY).

HYDRAULIC LIFT PLANNING WORKSHEET





TOWER CRANE LIFT PLANNING WORKSHEET



Job Number:	Date:	RIGGING COMPONENTS	
Job Description:	Lift Plan Prepared by:	Sling Type: ☐ Wire Rope ☐ Synthetic Web ☐ Synthetic Round ☐ Alloy Chain	
Location of Lift:	Crane Serial Number:	Sling Size: Length: Weight: Capacity:	
Operator Name:	Crane Model:	Angles: Have sling angles below 45° been eliminated? ☐ Yes ☐ No Shackles Size: Shackle Weight: Capacity:	
Crane Owner:	Contact Person:	Shackles Size Shackle Weight Capacity	
Weight of the Load Information Provided by:			
• • • • • • • • • • • • • • • • • • • •	Create Large Rigging Diagram on Back oil conditions (explain type and size) of mats or blocking	LIFT INFORMATION Weight of Load:	
		Total Weight to be Lifted: lbs. ÷ Capacity from Chart =% What is the maximum wind speed to be allowed: ls this critical lift (over 90%, special, or expensive, etc.) ☐ Yes ☐ No If yes, why?	
Prepared by: Signature:			
Operator:	Signature:		
Craft Supervisor:	Signature:	Date of pre-lift planning meeting:	
Date:		Crew performing work on: *Date plan submitted to crane superintendent/safety:	
Lift Supervisor:	Signature:		
Project Mngr./Supt.:	Signature:		

TOWER CRANE LIFT PLANNING WORKSHEET



