

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE	PAGE OF PAGES	
2. AMENDMENT/MODIFICATION NO. 0001		3. EFFECTIVE DATE 18-Dec-2014	4. REQUISITION/PURCHASE REQ. NO.		5. PROJECT NO.(If applicable) 1   2
6. ISSUED BY NAVFAC MID ATLANTIC PWD PHILADELPHIA NAVAL SUPPORT ACTIVITY BLDG 24 700 ROBBINS AVENUE PHILADELPHIA PA 19111-5098		CODE N40085	7. ADMINISTERED BY (If other than item 6) NAVFAC MID ATLANTIC PWD PHILADELPHIA 4921 S. BROAD STREET BLDG 1, 2ND FLOOR PHILADELPHIA PA 19112		CODE N40085
8. NAME AND ADDRESS OF CONTRACTOR (No., Street, County, State and Zip Code)			X	9A. AMENDMENT OF SOLICITATION NO. N40085-15-Q-7514	
			X	9B. DATED (SEE ITEM 11) 12-Dec-2014	
				10A. MOD. OF CONTRACT/ORDER NO.	
				10B. DATED (SEE ITEM 13)	
CODE		FACILITY CODE			
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS					
<input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offer <input type="checkbox"/> is extended, <input checked="" type="checkbox"/> is not extended.					
<p>Offer must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended by one of the following methods:</p> <p>(a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.</p>					
12. ACCOUNTING AND APPROPRIATION DATA (If required)					
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.					
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.					
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(B).					
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:					
D. OTHER (Specify type of modification and authority)					
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.					
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)					
<p>N40085-15-Q-7514 REMOVAL AND DISPOSAL OF TWO AIR HANDLING UNITS AND REPLACE OF TWO NEW UNITS IN BUILDING 2 SECTION B AT THE NAVAL SUPPORT ACTIVITY, PHILADELPHIA, PA.</p> <p>NOTE: THIS AMENDMENT MUST BE ACKNOWLEDGED WITH YOUR QUOTE.</p> <p>Description continues on page 2.</p>					
Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.					
15A. NAME AND TITLE OF SIGNER (Type or print)			16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)		
			SHANNON MACK / CONTRACT SPECIALIST		
			TEL: 215-897-3495 EMAIL: shannon.mack@navy.mil		
15B. CONTRACTOR/OFFEROR		15C. DATE SIGNED	16B. UNITED STATES OF AMERICA		16C. DATE SIGNED
_____ (Signature of person authorized to sign)			BY _____ (Signature of Contracting Officer)		18-Dec-2014

## SECTION SF 30 BLOCK 14 CONTINUATION PAGE

**SUMMARY OF CHANGES**

## SECTION SF 30 - BLOCK 14 CONTINUATION PAGE

The following have been added by full text:

AMENDMENT 0001

1. The date for receipt of quote **REMAINS** at 3:00 PM ET on 15 JANUARY 2015.

2. **NOTE:** THIS AMENDMENT MUST BE ACKNOWLEDGED WITH YOUR QUOTE.

3. **ADD:**

Attachment 1 AHA

Attachment 2 Site Map

Attachment A Contractor's New Lift Operations

4. **Response** to the following RFIs:

Q1: Will a tax-exempt form be issued with the award paperwork?

**A1: The Department of the Navy does not provide a tax exempt number for your use in securing the necessary exemptions from your state because only the cognizant state office has authority to render an opinion regarding the propriety of such a tax exemption.**

Q2. For clarification, is this a RFP or RFQ?

**A2. This is an RFQ.**

Q3. Does the Combined Synopsis/Solicitation under solicitation number N4008515Q7514 contain requirements similar to a current contract? If possible, please provide the current contract number. Or, is this a new requirement for the government?

**A3. This is a new requirement.**

(End of Summary of Changes)

# Activity Hazard Analysis (AHA)

ACTIVITY/WORK TASK:		Overall Risk Assessment Code (RAC) (Use highest code)						
	SIGNATURES	Activity #		AHA #				
PWD/OICC/ROICC OFFICE		<b>Risk Assessment Code (RAC) Matrix</b>						
NAME & DATE ACCEPTED BY GDA:		<b>Severity</b>	<b>Probability</b>					
CONTRACT NUMBER:			Frequent	Likely	Occasional	Seldom	Unlikely	
TASK ORDER/DELIVERY #:			Catastrophic	E	E	H	H	M
PRIME CONTRACTOR:			Critical	E	H	H	M	L
SUBCONTRACTOR:			Marginal	H	M	M	L	L
DATE OF PREPARATORY MEETING:		Negligible	M	L	L	L	L	
DATE OF INITIAL INSPECTION:								
CONTRACTOR COMPETENT PERSON:								
SITE SAFETY and HEALTH OFFICER								
<b>ACCEPTANCE BY GOVERNMENT DESIGNATED AUTHORITY (GDA)</b>		Review each "Hazard" with identified safety "Controls" and determine (RAC)						
E = EXTREMELY HIGH (PWO/OICC/ROICC)		Identify the RAC (Probability/Severity) as E, H, M, or L for each "Hazard" .Place the highest RAC at the top of AHA. This is the overall risk assessment code for this activity						
H = HIGH RISK (FEAD DIRECTOR)		<p>"Severity" is the outcome/degree if an incident, near miss, or accident did occur and identified as: Catastrophic, Critical, Marginal, or Negligible after controls are in place</p> <p>"Probability" is the likelihood to cause an incident, near miss, or accident did occur and identified as: Frequent, Likely, Occasional, Seldom, or Unlikely after controls are put in place.</p>						
M = MODERATE RISK (CM or ET or PAR)								
L = LOW RISK (ET or PAR)								
<b>Job Steps</b>	<b>Hazards</b>	<b>Controls</b>			<b>RAC</b>			

**IAW EM 385 01.A.13 Contractor-Required AHA "Work will not begin until the AHA for the work activity has been accepted by the GDA" The AHA shall be reviewed and modified as necessary to address changing site condition, operations or change of competent/qualified person's**

Job Steps	Hazards	Controls	RAC

**IAW EM 385 01.A.13 Contractor-Required AHA “Work will not begin until the AHA for the work activity has been accepted by the GDA”  
The AHA shall be reviewed and modified as necessary to address changing site condition, operations or change of competent/qualified person’s**

Equipment to be Used	Training Requirements and Competent or Qualified Personnel name(s)	Inspection Requirements	RAC

**IAW EM 385 01.A.13 Contractor-Required AHA “Work will not begin until the AHA for the work activity has been accepted by the GDA”  
The AHA shall be reviewed and modified as necessary to address changing site condition, operations or change of competent/qualified person’s**

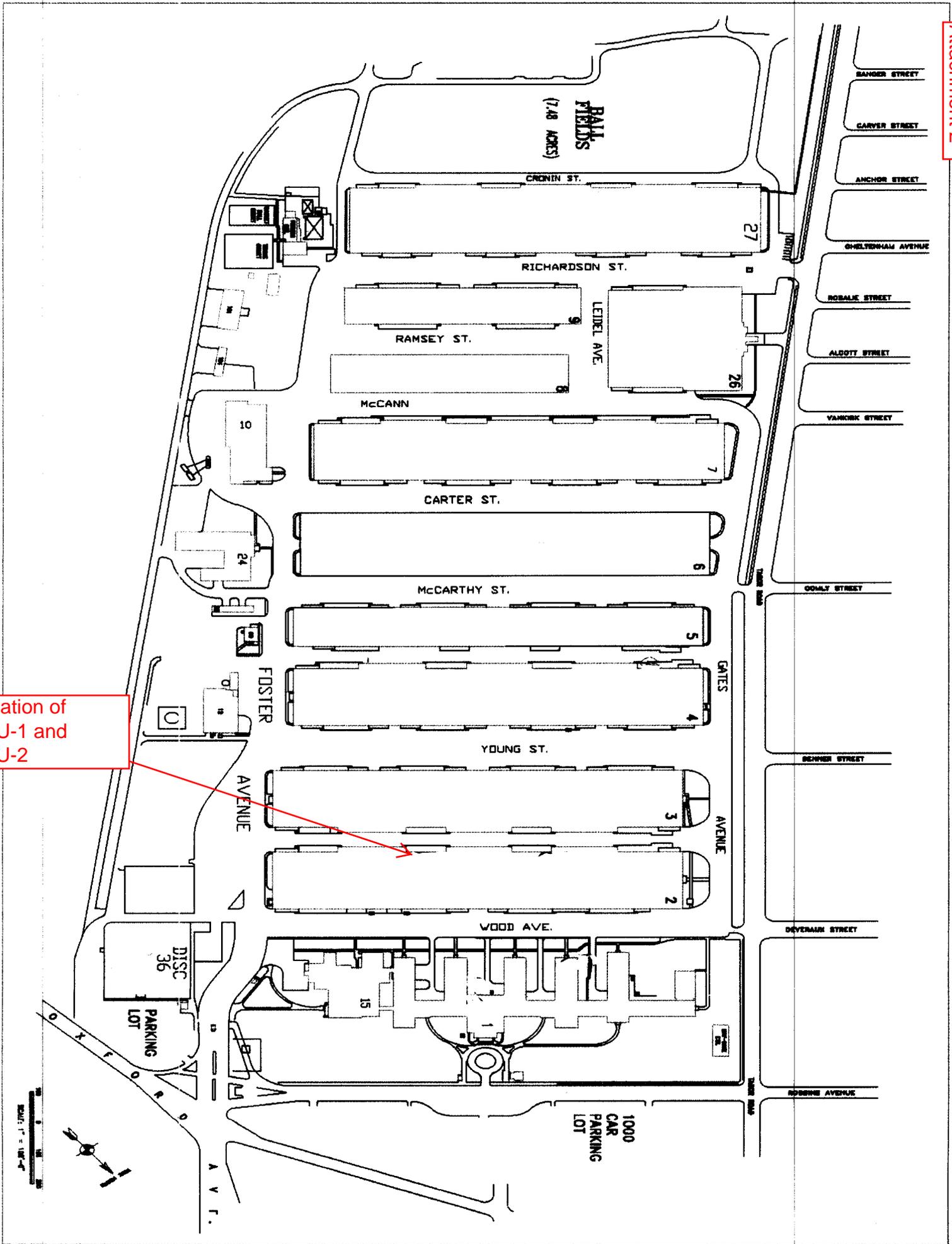
Equipment to be Used	Training Requirements/Competent or Qualified Personnel name(s)	Inspection Requirements

**IAW EM 385 01.A.13 Contractor-Required AHA “Work will not begin until the AHA for the work activity has been accepted by the GDA”  
The AHA shall be reviewed and modified as necessary to address changing site condition, operations or change of competent/qualified person’s**

## Instructions for completing Contractor Activity Hazard Analysis

1. **Activity/Work Task** – Insert work/task this AHA is written for i.e. excavation, scaffold building, foundation preparation.
2. **PWO/OICC/ROICC** – Insert name of Public Works Office, Officer In Charge of Construction Office or Resident Officer in Charge of Construction (PWD/OICC/ROICC)
3. **Enter name & date AHA accepted by Government Designated Authority (GDA)**
4. **Enter contract number**
5. **Enter Task order or Delivery order number**
6. **Enter Prime Contractors name**
7. **Enter Subcontractors name**
8. **Enter date preparatory meeting was held**
9. **Enter date initial inspection was performed**
10. **Enter name of contractor competent person on site for this activity**
11. **Enter name of Prime Contractor Site Safety and Health Officer**
12. **Level of government person responsible for accepting the AHA, progressive signatures as level of risk increases.**
13. **Overall Risk Assessment code is highest code assigned to any Job step after Hazards are assessed and Controls have been assigned**
14. **Schedule number is activity number from production daily reports**
15. **AHA number is the sequential number of all AHA's for this contract.**
16. **Job steps is the complete sequence of work, not general statements to complete the entire activity**
17. **Hazards is the known safety risks associated with completing the task**
18. **Controls is the safety measures in place to reduce the hazard to the lowest level possible**
19. **Risk Assessment code is where Severity and Probability intersect, place that letter E, H, M, or L in the RAC column**
20. **List all equipment to be used to complete this activity i.e. crane, backhoe, vehicle, all heavy equipment**
21. **List the training requirements required by EM 385, Safety Spec 01356 or OSHA that apply to this task.**
  - List competent person(s) required for specific tasks in EM 385
  - List qualified person(s) required for specific tasks in EM 385
  - List CPR/First Aid training and qualification dates
22. **List all inspection requirements of EM 385, Governmental Safety Requirements Specifications or OSHA 29 CFR 1926**

**IAW EM 385 01.A.13 Contractor-Required AHA “Work will not begin until the AHA for the work activity has been accepted by the GDA”  
The AHA shall be reviewed and modified as necessary to address changing site condition, operations or change of competent/qualified person’s**



Location of AHU-1 and AHU-2



**ATTACHMENT A  
(18 September 2010)**

**REQUIREMENTS FOR CONTRACTOR LIFT OPERATIONS**

**A.1 GENERAL REQUIREMENTS:** Mobile Cranes, multi-purpose machines, Material Handling Equipment (Forklifts) and other Construction equipment used to lift suspended loads shall be capable of safely lifting the heaviest load to and from its destination. Cranes, multi-purpose machines, Material Handling Equipment (Forklifts) and other Construction equipment, operators, operations, riggers, and rigging gear used to set outrigger pads and assemble counterweights, and operations shall be qualified and in accordance with NAVFAC P-307, Sections 6, 7, 8, 10, 11, 12, and 14, Occupational Safety and Health Administration (OSHA) 29 CFR, Parts 1910, 1915, 1917, 1918, 1919 and 1926, Army Corps of Engineers Manual EM 385-1-1 dated 15 September 2008, and COMNAVREG MIDLANT INSTRUCTION 11262.1, Contractor Crane Oversight Specification dated 8 February 2008.

Crane and other lift operations using multi-purpose machines, Material Handling Equipment (Forklifts) and other Construction equipment used to lift suspended loads shall not proceed until the Government receives and approves submittals specified in paragraph A.3.

**A.2 REQUIREMENTS FOR ALL LIFTS:** Lifts may be classified as “critical” by Navy standards if the capacity exceeds 75% of the mobile crane’s rated capacity or the operator cannot see the rigger. The Contractor shall **submit a Lift Plan (Attachment A-1) for all crane operations** and a Lift Plan for all Critical Lifts using multi-purpose machines, Material Handling Equipment (Forklifts) and other Construction equipment

**A.3 SUBMITTALS.** The Contractor shall submit the following documentation for Government approval three (3) business days prior to each lift event, except that the Critical Lift Plan (if required) shall be submitted ten (10) days prior to each lift event.

**SUBMITTALS FOR CRANE OPERATIONS:**

- A.3.1 Lift Plan (Attachment A-1)
- A.3.2 Completed Certificate of Compliance (Attachment A-2).
- A.3.3 Annual and quadrennial inspection document for the crane.
- A.3.4 Crane Operator’s Medical Certificate and operator’s qualification’s license.
- A.3.5 Crane’s load chart.
- A.3.6 Crane’s data sheet.
- A.3.7 Job site ground loading conditions listing applicable restrictions.
- A.3.8 Job site cribbing plan.
- A.3.9.a Crane Operational Permit for Pier 4 (Attachment A-3.a).
- A.3.9.b Crane Operation Permit for Piers & Wharfs (Attachment A-3.b).
- A.3.10 Contractor Crane Entry Package Checklist (Attachment A-4).
- A.3.11 Crane and Rigging Gear Accident Report (Attachment A-6, if required).
- A.3.12 Contractor Crane or Rigging Operation Checklist (Attachment A-7).

**SUBMITTALS FOR OTHER LIFT OPERATIONS USING MULTI-PURPOSE MACHNIES,  
MATERIAL HANDLING EQUIPMENT AND OTHER CONSTRUCTION EQUIPMENT:**

- A.3.13 Critical Lift Plan (if applicable, see paragraph A.7.17)
- A.3.14 Completed Certificate of Compliance (Attachment A-2).

**A.4 PERMIT FOR CRANE OPERATIONS AND LIFT OPERATIONS USING MULTI-PURPOSE  
MACHNIES, MATERIAL HANDLING EQUIPMENT AND OTHER CONSTRUCTION**

**EQUIPMENT:** Prior to arriving on-site for any event, the Contractor shall, without additional expense to

the Government, obtain all appointments, licenses, and permits required for the prosecution of the work. **Additionally, prior to commencing work for any crane lift event, the contractor shall participate in a pre-lift conference with the Government Crane Surveillance Team and review the Contractor Crane Entry Package Checklist (Attachment A-4) and Lift Plan (Attachment A-1). Upon completion of the pre-lift conference and review of Attachment A-4 and Attachment A-1, the Government Crane Surveillance Team will issue a completed NAVFAC MIDLANT Contractor Crane Operating Permit (Attachment A-5) prior to start of work for each event. This permit must be posted in the operator's cab and be visible to the government representative.**

**A.5 INSPECTION OF CRANE OPERATIONS:** The Government Crane Surveillance Team Inspector, **Gerald Wendrick, 215-399-6043 (mobile) or 215-897-6242 (office), or Gilbert Milbourne, 215-897-3522**, who is a representative of the Officer in Charge, NAVFAC Contracts, will inspect the contractor's crane, the contractor's required documentation, and the work. All scheduling for this inspection shall be coordinated through this inspector.

**A.6 LIST OF ATTACHMENTS APPLICABLE TO CRANE OPERATIONS:**

- A-1. NAVFAC MIDLANT PWD PA Lift Plan (3 pages)
- A-2. Certificate of Compliance (1 page)
- A-3.a Crane Operational Permit for Pier 4
- A-3.b Crane Operational Permit for Piers and Wharfs
- A-4. Contractor Crane Entry Package Checklist (2 pages)
- A-5. NAVFAC MIDLANT Contractor Crane Operating Permit (1 page)
- A-6. Crane and Rigging Gear Accident Report (1 page)
- A-7. Contractor Crane or Rigging Operation Checklist (2 pages)

**A.7 SAFETY REQUIREMENTS AND ACCIDENT REPORTING FOR ALL LIFT OPERATIONS:**  
**The following requirements shall be met in addition to safety requirements discussed in other sections of the specification.**

**A.7.1** The Contractor shall submit to the Contracting Officer a full report of damage caused by crane operations to Government property or equipment by contractor employees. All damage reports shall be submitted to the Contracting Officer within 24 hours of the occurrence using the Crane and Rigging Gear Accident Report (Attachment A-6). The Contractor shall notify the Contracting Officer as soon as practical, but not later than four hours, after any WHE accident. (See definition in section 12 of P-307.) The Contractor shall secure the accident site and protect evidence until released by the Contracting Officer. The Contractor shall conduct an accident investigation to establish the root cause(s) of any WHE accident. Crane operations shall not proceed until cause is determined and corrective actions have been implemented to the satisfaction of the Contracting Officer. The Contractor shall provide the Contracting Officer within 30 days of any accident a Crane and Rigging Gear Accident Report using the form provided as Attachment A-6 consisting of a summary of circumstances, an explanation of causes(s), photographs (if available), and corrective actions taken. These notifications and reporting requirements are in addition to those promulgated by OPNAVINST 5100.23 and related command instructions.

**A.7.2** Crane operators shall meet the requirements in U. S. Army Corps of Engineers Safety and Health Requirements Manual EM 385-1-1, Section 16. Crane operations shall also be in accordance with NAVFAC P0307, Sections 9, 10, 11, and 12. In addition, for mobile and commercial truck mounted cranes with Original Equipment Manufacturer (OEM) rated capacities of 2,000 pounds or greater, crane operators shall be designated as qualified by a source that qualifies crane operators (i.e., union, a government agency, or an organization that tests and qualifies crane operators). Proof of current qualification shall be provided. The Contractor shall certify (Attachment A-2) that the operator is qualified and trained for the operation of the crane or machine to be used. Crane operators shall be licensed in accordance with the requirements of NAVFAC P-307, Sections 6, 7, and 8.

**A.7.3** The Contractor shall comply with the crane manufacturer's specifications and limitations for erection

and operation of cranes and hoists used in support of the work. Erection shall be performed under the supervision of a designated person (as defined in ASME B30.5). All testing shall be performed in accordance with the manufacturer's recommended procedures.

**A.7.4** The Contractor shall comply with ASME B30.5 and 29CFR 1926 for mobile cranes. All contractor rigging gear shall comply with, ASME B30.9, B30.10, B30.20a, B30.23, B30.26, and B18.15 as a minimum. The contractor shall comply with all OEM recommendations for selection, use, and maintenance for all rigging gear. Rigging equipment and usage practices shall also be accordance with NAVFAC P-307, Section 14.

The Contractor shall comply with specific activity regulations pertaining to crane safety and operation (including allowable access routes and ground loading limitations), and notify the contracting officer, in advance, of any cranes entering the activity or of any multi-purpose machines, material handling equipment, or construction equipment that may be used in a crane-like application to lift suspended loads. The contractor shall comply with applicable ANSI or ASME standards (e.g., ASME B30.5 for mobile cranes, ASME B30.22 for articulating boom cranes, ASME B30.3 for construction tower cranes, and ASME B30.8 for floating cranes, ASME B30.9 for slings, ASME B30.20 for below the hook lifting devices, and ASME B30.26 for rigging hardware, ANSI/ITSDF B56.6 for rough terrain forklifts). For barge-mounted mobile cranes, Contractor shall obtain a third party certification from an OSHA accredited organization (or a third party certification from a state accredited organization for those states with OSHA approved state plans), a load indicating device, a wind indicating device, and a marine type list and trim indicator readable in one-half degree increments.

Contractor shall certify (Attachment A-2) that the crane (or other machine if used to lift suspended loads) and the rigging equipment meet applicable OSHA and ANSI/ASME regulations (cranes/multipurpose machines used in cargo transfer shall comply with 29 CFR 1917; cranes/multi-purpose machines used in construction, demolition, or maintenance shall comply with 29 CFR 1926; cranes/multi-purpose machines used in shipbuilding, ship repair, or shipbreaking shall comply with 29 CFR 1915; slings shall comply with ASME B30.9, rigging hardware shall comply with ASME B30.26). The contractor shall also certify that all of its crane (or other machine) operators working on the naval activity have been trained not to bypass safety devices (e.g., anti-two block devices) during lifting operations. Certifications shall be posted on the crane.

For multi-purpose machines, material handling equipment, and construction equipment used to lift loads suspended by rigging equipment, Contractor shall provide proof or authorization from the machine OEM that the machine is capable of making lifts of loads suspended by rigging equipment. Contractor shall demonstrate that the equipment is properly configured to make such lifts and is equipped with a load chart.

**A.7.5** Under no circumstance shall a Contractor make a lift at or above 90% of the cranes rated capacity in any configuration.

**A.7.6** When operating in the vicinity of overhead transmission lines, operators and riggers shall be alert to this special hazard and shall follow the requirements of USACE EM 385-1-1 section 11 and ASME B30.5 or ASME B30.22 as applicable.

**A.7.7** Crane suspended personnel work platforms (baskets) shall not be used unless the Contractor proves that using any other access to the work location would provide a greater hazard to the workers or is impossible. Personnel shall not be lifted with a line hoist or friction crane.

**A.7.8** All employees shall be kept clear of loads about to be lifted and of suspended loads.

**A.7.9** The Contractor shall use cribbing when performing lifts on outriggers.

**A.7.10** The crane hook/block must be positioned directly over the load. Side loading of the crane is prohibited.

**A.7.11** A physical barricade must be positioned to prevent personnel from entering the counterweight swing (tail swing) area of the crane.

**A.7.12** Certification records which include the date of inspection, signature of the person performing the inspection, and the serial number or other identifier of the crane that was inspected shall always be available for review by Contracting Officer personnel.

**A.7.13** Written reports listing the load test procedures used along with any repairs or alterations performed on the crane shall be available for review by Contracting Officer personnel.

**A.7.14** Certify that all crane operators have been trained in proper use of all safety devices (e.g. anti-two block devices).

**A.7.15** Take steps to ensure that wind speed does not contribute to loss of control of the load during lifting operations. Prior to conducting lifting operations the contractor shall set a maximum wind speed at which a crane can be safely operated based on the equipment being used, the load being lifted, experience of operators and riggers, and hazards on the work site. This maximum wind speed determination shall be included as part of the activity hazard analysis plan for that operation.

**A.7.16** All hooks used on cranes, hoists, other machines, and rigging gear shall have self-closing latches or the throat opening shall be "moused" (secured with wire, rope, heavy tape, etc.) or otherwise secured to prevent the attached item from coming free of the hook under a slack condition. The following exceptions apply and shall be approved by the contractor's technical organization: items where the hook throat is fully obstructed and not available for manual securing and lifts where securing the hook throat increases the danger to personnel such as forge shop, dip tank, or underwater work.

**A.7.17** A critical lift plan shall be submitted for each of the following lifts: lifts over 75 percent of the capacity of the crane, hoist, or other machine (lifts over 50 percent of the capacity of a barge mounted mobile crane's hoists) at any radius of lift; lifts involving more than one crane, hoist, or other machine; lifts of personnel (lifts of personnel suspended by rigging equipment from multi-purpose machines, material handling equipment, or construction equipment shall not be permitted); lifts made in the vicinity of overhead power lines; erection of cranes; and lifts involving non-routine rigging or operation, sensitive equipment, or unusual safety risks. The plan shall include the following as applicable:

**A.7.17.1** The size and weight of the load to be lifted, including crane (or other machine) and rigging equipment that add to the weight. The OEM's maximum load capacities for the entire range of the lift shall also be provided.

**A.7.17.2** The lift geometry, including the crane (or other machine) position, boom length and angle, height of lift, and radius for the entire range of the lift. Applies to both single and multiple crane/machine lifts.

**A.7.17.3** A rigging plan, showing the lift points, rigging equipment, and rigging procedures.

**A.7.17.4** The environmental conditions under which lift operations are to be stopped.

**A.7.17.5** For lifts of personnel, the plan shall demonstrate compliance with the requirements of 29 CFR 1926.550(g).

**A.7.17.6** For barge mounted mobile cranes, barge stability calculations identifying crane placement/footprint; barge list and trim based on anticipated loading; and load charts based on calculated list and trim specific to the barge the crane is mounted on. The amount of list and trim shall be within the crane manufacturer's requirements.

**A.7.17.7** For lifts in the vicinity of overhead power lines (i.e., if any part of the crane or other machine, including the fully extended boom of a telescoping boom crane or machine, or the load could approach the

distances noted in figure 10-3 of P-307 during a proposed operation), the plan shall demonstrate compliance to 29 CFR 1926.550(a)(15).

# NAVFAC MIDLANT PWDPA LIFT PLAN

Complete and use this document to conduct a mandatory pre-lift brief with all crane team personnel prior to lifting operations.

**CONTRACT NO:** \_\_\_\_\_  
**CONTRACT TITLE:** \_\_\_\_\_  
**LIFT DATE:** \_\_\_\_\_  
**LIFT TYPE: (Routine/Critical)** \_\_\_\_\_

a. **CLEARANCES:** (attach separate approvals as required)

1. Approved Utility Outages
2. Approved Road Closure and/or Restrictions

b. **LOAD WEIGHT** (known weight or verify weight with load indicator): \_\_\_\_\_

c. **LIFT GEOMETRY FOR ENTIRE RANGE OF LIFT:** (provide for each lift evolution)

1. Crane Position to Lift & Load \_\_\_\_\_
2. Lift Height Range \_\_\_\_\_
3. Load Radii (Min: \_\_\_\_\_ ) (Max: \_\_\_\_\_ )
4. Boom Length \_\_\_\_\_
5. Boom Angles used (determine exact boom angle, do not rely on the crane's boom angle indicator for critical lifts) \_\_\_\_\_

√ **NOTE: Ensure lift and swing path is clear of obstructions and maintain required clearance from electrical sources, and all persons are clear of the swing radius around the crane lift position.**

d. **CRANE DEDUCTIONS** (calculate)

1. Weight of Load (heaviest load) \_\_\_\_\_
2. Weight of Block/s \_\_\_\_\_
3. Weight of Headache Ball \_\_\_\_\_
4. Weight of Lifting Bar (Spreader Bars. etc) \_\_\_\_\_
5. Weight of Sling/Shackles/Gear \_\_\_\_\_
6. Weight of Jib & other attachments (see load chart) \_\_\_\_\_
7. Weight of load line beyond boom nose \_\_\_\_\_
8. Total Load on Crane \_\_\_\_\_
9. Capacity of crane as configured (boom length, radius, reeving, jibs) \_\_\_\_\_
10. Lift is ( \_\_\_\_\_ %) of crane's capacity (Shall not exceed 90% of crane capacity)

e. **LIFT PROCEDURE:** (Attach narrative, and detailed sketches as required)

ATTACHMENT A-1

# NAVFAC MIDLANT PWDPA LIFT PLAN

f. **CREW QUALIFICATIONS** (attach license, and medical certificate or experience endorsement statement):

1. Crane Operator (*License Required, Medical Certificate*)
2. Lift Supervisor
3. Signal Person(s)
4. Crane/Rigging Walker(s) or Helper(s)
5. Rigger(s)

g. **RIGGING PLAN** – Lift Configuration, rigging gear (type, sizes, lengths, capacities, angle of application, applied loads, rigging procedures, safety plan, and stop points during evolution, as required (attach sketches as required):

h. **GROUND CONDITIONS** (Cribbing is mandatory for all ground conditions. Outriggers shall be positioned on crane rails when available.):

1. Bare Ground (\_\_\_\_) consider type of soil and loading capacity
2. Concrete (\_\_\_\_) confirm loading capacity is adequate
3. Asphalt (\_\_\_\_) confirm loading capacity is adequate
4. Pier & Wharf (\_\_\_\_) (obtain pier load limits from Public Works Engineers)

i. **WEATHER CONDITIONS DEEMED UNSAFE FOR LIFT OPERATIONS** (Wind speed shall not exceed 25 mph):

1. Reduced Visibility (How far) \_\_\_\_\_
2. Icing (Where) \_\_\_\_\_
3. Lightning, Static Electricity (or similar events) \_\_\_\_\_

j. **COMMUNICATIONS:** (Discuss with entire crane team)

1. Hand Signal (\_\_\_\_) Any non-standard signals?
2. Radio (\_\_\_\_) Blind Lifts

# NAVFAC MIDLANT PWDPA LIFT PLAN

k. **CREW LIST** (print names with signatures):

---

---

---

---

---

---

---

---

---

---

l. **HAZARD ANALYSIS FOR CRANE SET-UP AND SET-DOWN PROCEDURES**  
(attach).

m. **LIFT SUPERVISOR'S STATEMENT:**

I, \_\_\_\_\_ certify that all items listed above have been addressed for this lift operation held today.

SIGNATURE OF LIFT SUPERVISOR: \_\_\_\_\_

APPENDIX P – CONTRACTOR CRANE (OR ALTERNATE MACHINE USED TO LIFT  
SUSPENDED LOAD) AND RIGGING GEAR REQUIREMENTS

<b>CERTIFICATE OF COMPLIANCE</b>	
This certificate shall be signed by an official of the company that provides cranes (or multi-purpose machines, material handling equipment, or construction equipment used to lift loads suspended by rigging gear) or rigging gear for any application under this contract. Post a completed certificate on each crane or alternate machine (or in the contractor's on-site office for rigging operations) brought onto Navy property.	
CONTRACTING OFFICER'S POINT OF CONTACT (Government Representative)	PHONE
PRIME CONTRACTOR/PHONE	CONTRACT NUMBER
CRANE OR ALTERNATE MACHINE SUPPLIER/PHONE (if different from prime contractor)	CRANE OR ALTERNATE MACHINE NUMBER (i.e., ID number)
CRANE OR ALTERNATE MACHINE MANUFACTURER/TYPE/CAPACITY	
CRANE OR ALTERNATE MACHINE OPERATOR'S NAME(S)	
<p>I certify that</p> <ol style="list-style-type: none"> <li>The above noted crane or alternate machine and all rigging gear conform to applicable OSHA regulations (host country regulations for naval activities in foreign countries) and applicable ASME B30 standards. The following OSHA regulations and ASME standards apply: _____</li> <li>The operators noted above have been trained and are qualified for the operation of the above noted crane(s) or alternate machine(s).</li> <li>The operators noted above have been trained not to bypass safety devices during lifting operations.</li> <li>The operators, riggers and company officials are aware of the actions required in the event of an accident as specified in the contract.</li> </ol>	
COMPANY OFFICIAL SIGNATURE	DATE
COMPANY OFFICIAL NAME/TITLE	
<p><b>POST ON CRANE (OR ALTERNATE MACHINE)</b> (IN CAB OR VEHICLE) (or in the contractor's on-site office for rigging operations)</p>	

FIGURE P-1

# Crane Operational Permit for Pier 4

Crane Contractor:	Vehicle Type:
Crane ID Number:	Model #:

<u>Axle Loads in Travel Configuration</u>	<u>Tractor Trailer Axle Loads</u>	<u>Outrigger Spacing</u>		<u>Max Outrigger Reaction</u>	
First Axle Load:		Full Ext	Mid Ext	Full Ext	Mid Ext
Second Axle Load:		Front:			
Third Axle Load:		Side:			
Fourth Axle Load:					
Fifth Axle Load:					
Sixth Axle Load:					
Gross Vehicular Weight:					

**GENERAL CRANE OPERATING REQUIREMENTS:**

- The crane and tractor trailers shall not travel outside of the designated "Vehicle Travel Path" or the "Crane Operational Area".
- The crane shall **only** travel on the pier while in it's "**Travel Configuration**" as identified above and with no counterweights on the vehicle. Maximum single axle load for cranes and tractor trailers shall not exceed 26,000 pounds.
- Tractor trailers shall be removed from the pier after off-loading cribbing, spreader beams, hook blocks, rigging gear, etc.
- The contractor shall provide the **maximum outrigger reaction** for each job on the pier for review.
- The contractor shall position all outrigger pads prior to attaching the counterweights and erecting the boom.
- No outrigger pad shall be positioned on utility manhole covers, access covers, or on pier utility trenches.
- It shall be the contractor's responsibility to properly design and construct outrigger cribbing to evenly distribute the outrigger reactions.

**LIFTING IN THE "CRANE OPERATIONAL AREA":**

- The contractor shall provide outrigger cribbing to evenly distribute outrigger reactions so as **not to exceed 900 psf**.

**LIFTING FROM THE "VEHICLE TRAVEL PATH":**

- Crane operations in the "Vehicle Travel Path" shall be authorized on a limited basis when no other alternatives are available.
- There shall be no lifts over the front of the crane. All operations shall occur along the back 180 degrees of the crane.
- The contractor shall provide spreader beams spanning between two (2) track rail beams so as not to impose any load on the slab.
- Outrigger reactions shall be limited to a maximum of 120,000 pounds centered on the spreader beams and centered between pile bents for the outrigger(s) transmitting the greatest reaction(s) during the lifting operation.
- Outrigger reactions shall be limited to a maximum of 70,000 pounds for all other configurations. This includes outrigger reactions not centered on spreader beams and/or pile bents and outrigger pads positioned directly on pile caps or track rail beams.

**APPROVAL OF CRANE PERMITS FOR LIFTS ON PIER 4 IS GOVERNED BY DWG S-101 PIER 4 OPERATIONAL GUIDELINES (8/31/09).**

**Note:** No lifting operation shall exceed the existing prescribed allowable pier capacities and/or operational requirements outlined above. The contractor shall submit a "Crane Data Sheet" to a designated NAVFAC MIDLANT PWD PA Weight Handling Engineer for evaluation of the prescribed crane operation a minimum of three business day prior to the proposed lifting operation. Approval shall be contingent upon a satisfactory review and evaluation of the prescribed operation. **The Contractor shall not hold the government liable for any delay caused by such review including disapproval of the proposed lift.**

Permits shall be kept inside the operator's cab at all times while on the pier. Any questions regarding the permits shall be directed to NAVFAC MIDLANT PWD PA Weight Handling Engineer at telephone 215-897-6230. The Contractor has read and understands the imposed restrictions for operating on all piers.

Contractor Representative	Date	NAVFAC MIDLANT PWD PA Weight Handling Engineer Approval	Date
---------------------------	------	---	------

**Permit Expiration Date**

Attachment A-3.a

# Crane Operational Permit for Piers & Wharfs

Crane Contractor:	Vehicle Type:
Crane ID Number:	Model #:

<u>Axle Loads in Travel Configuration</u>	<u>Tractor Trailer Axle Loads</u>	<u>Outrigger Spacing</u>		<u>Max Outrigger Reaction</u>	
First Axle Load:	Second Axle Load:	Full Ext	Mid Ext	Full Ext	Mid Ext
Third Axle Load:	Fourth Axle Load:	Front:			
Fifth Axle Load:	Sixth Axle Load:	Side:			
Gross Vehicular Weight:					

**GENERAL CRANE OPERATING REQUIREMENTS:**

- Location – Indicate on Base Map. Attach to Permit.
- The crane shall **only** travel on piers and wharfs while in it's "Travel Configuration" as identified above and with no counterweights on the vehicle. Maximum single axle load for cranes and tractor trailers shall not exceed 26,000 pounds.
- Tractor trailers shall be removed from the piers and wharfs after off-loading cribbing, spreader beams, hook blocks, rigging gear, etc.
- The contractor shall provide **the maximum outrigger reaction** for each job on the pier and wharf for review.
- The contractor shall position all outrigger pads prior to attaching the counterweights and erecting the boom.
- No outrigger pad shall be positioned on utility manhole covers, access covers, or on pier utility trenches.
- It shall be the contractor's responsibility to properly design and construct outrigger cribbing to evenly distribute the outrigger reactions

**LIFTING ON PIERS:**

- The contractor shall provide outrigger cribbing to evenly distribute outrigger reactions so as **not to exceed 600 psf**.
- Load side outriggers shall be offset a minimum of 25 feet from the edge of the wharf.
- Outrigger cribbing shall be positioned on crane rails to the maximum extent practicable.

**LIFTING ON WHARFS**

- The contractor shall provide outrigger cribbing to evenly distribute outrigger reactions so as **not to exceed 900 psf**.
- Load side outriggers shall be offset a minimum of 25 feet from the edge of the wharf.
- Outrigger cribbing shall be positioned on crane rails to the maximum extent practicable.

**Note:** No lifting operation shall exceed the existing prescribed allowable pier capacities and/or operational requirements outlined above. The contractor shall submit a "Crane Data Sheet" to a designated NAVFAC MIDLANT PWD PA Weight Handling Engineer for evaluation of the prescribed crane operation a minimum of three business days prior to the proposed lifting operation. Approval shall be contingent upon a satisfactory review and evaluation of the prescribed operation. **The Contractor shall not hold the government liable for any delay caused by such review including disapproval of the proposed lift.** Permits shall be kept inside the operator's cab at all times while on the pier or wharf. Any questions regarding the permits shall be directed to NAVFAC MIDLANT PWD PA Weight Handling Engineer at telephone 215-897-3522. The Contractor has read and understands the imposed restrictions for operating on all piers and wharfs.

Contractor Representative	Date	NAVFAC MIDLANT PWD PA Weight Handling Engineer Approval	Date
---------------------------	------	---	------

**Permit Expiration Date**

**CONTRACTOR CRANE ENTRY PACKAGE CHECKLIST**

COMNAVREGMIDLANTINST 11262.1

08 FEB 2008

1	Name of Crane Company & Crane Number	Company				
		Crane Manufacture/Crane Model/Crane Number				
2	Date of Annual Inspection Expiration					
3	Date of Quadrennial Inspection Expiration					
4	Name & phone number of Contracting Official (or designated local representative)	Contracting Official				
		Phone Number				
5	Does the package include a routine or critical lift plan?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
6	Location of lift site					
7	Duration crane will be continuously on the job site (hrs, days, weeks...)					
8	Does plan include certification from contractor that the crane complies with ASME B30 standard [B30.5 (mobile cranes), B30.8 (floating cranes), B30.22 (articulating boom cranes), or B30.3 (construction tower cranes)] as applicable?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
9	Does plan include a certificate of compliance per NAVFACMIDLANTINST 11262.1 [enclosure (1)]?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
10	Which OSHA regulations does the certificate of compliance indicate? (For cranes used in cargo transfer, 29 CFR 1917 applies; for cranes used in construction, demolition, or maintenance, 29 CFR 1926 applies; for cranes used in shipbuilding, ship repair, or ship breaking, 29 CFR 1915 applies).					
11	Does plan include valid medical certificate and proof of operator qualification from a source that qualifies crane operators (union, governmental agency, or an organization that tests and qualifies crane operators)? Verify qualification for each back-up operator (if provided) on the certificate of compliance.			Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
12	Does the plan designate a qualified Rigger-in-Charge?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
13	What is the weight of the heaviest load to be lifted?			lbs.		
14	What is the weight of the rigging gear?			lbs.		
15	What are the crane components (and their weights) that add to the weight of the load (hook, jib, etc.)?		Main Block	lbs.		
			Aux. Block	lbs.		
			Jib (Stowed)	lbs.		
			Jib (Erected)	lbs.		
			Other	lbs.		
16	What is the maximum total crane lift (sum of 13, 14 & 15 above)?		<b>TOTAL</b>		lbs.	
17	What is the capacity of the crane as configured?			lbs.		
18	What percentage of crane capacity does this lift represent?			%		
19	What is the main boom length? If a jib will be utilized, indicate the length and offset.		MAIN	JIB	OFFSET	
20	What are the minimum and maximum load radii?		Min.	Max.		
21	Does the plan include the manufacturer's load chart for entire range of lift(s)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
22	Does plan include ground loading and outrigger reaction data to determine cribbing requirements, or a Waterfront Operational Permit?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

08 FEB 2008

23	For crawler crane, does the plan indicate area restrictions for operation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
24	For floating crane, does plan include maximum allowable list?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
25	For mobile crane mounted on barge, is crane equipped with load indicating device? wind indicating device? marine type list and trim indicator (readable in one-half degree increments)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
26	For mobile crane mounted on barge, does plan include revised load chart?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
27	What are the environmental conditions under which crane operations are to be stopped?			
28	Will the crane perform critical lifts per NAVFACMIDLANTINST 11262.1? (If no, skip items 29-49.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
29	What circumstances require this lift to be classified as a critical lift? (Blind lift, 75% of chart, non-routine rigging, etc.)			
30	What are the exact dimensions of the load? (L x W x H)			
31	Does the plan indicate the crane position? (Overhead view)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
32	What is the maximum lift height of the lift?			
33	What is the minimum boom angle?			
34	What is the maximum boom angle?			
35	What is the name of the operator?			
36	Indicate name(s) of backup operator (if required).			
37	Does the plan show lift points?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
38	Does the plan describe the rigging procedures?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
39	Does the plan indicate rigging hardware requirements?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
40	For personnel lifts, does the plan demonstrate compliance with 29 CFR 1926.550?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
41	Does EM 385-1-1 govern this lift?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
42	What are the coordination and communication requirements for the lift (e.g., radio and hand signals)?			
43	For tandem or tailing crane lifts, does the plan indicate the make and model of the crane, the line, boom, and swing speeds, and the requirement for an equalizer beam?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
44	For floating cranes, refer to questions 20-22?			
45	What is the name of the lift supervisor?			
46	Does the plan indicate the qualifications of the lift supervisor?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
47	What are the names of the riggers?			
48	Does the plan indicate the qualifications of the riggers?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
49	Did all involved personnel (Operator, Riggers, Lift Supervisor, etc.) sign the critical lift plan?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Signature below verifies crane package complies with NAVFACMIDLANTINST 11262.1.

Name	Organization	Signature	Date	Phone
Contracting Official:				
Reviewed By				

**NAVFAC MIDLANT  
CONTRACTOR CRANE  
OPERATING PERMIT**

\_\_\_\_\_  
**DATE ISSUED**

\_\_\_\_\_  
**EXPIRATION DATE**

**CONTRACTING AGENT PHONE# & NAME** \_\_\_\_\_  
\_\_\_\_\_

**CONTRACT OR JOB ORDER#** \_\_\_\_\_

**AUTHORIZED LOCATION** \_\_\_\_\_

**CRANE CONTRACTOR** \_\_\_\_\_

**CRANE NUMBER** \_\_\_\_\_

**SIGNATURE/ PERMIT NUMBER** \_\_\_\_\_

08 FEB 2008

### CRANE AND RIGGING GEAR ACCIDENT REPORT

<b>Accident Category:</b> <input type="checkbox"/> Crane Accident <input type="checkbox"/> Rigging Gear Accident	
<b>From:</b>	<b>To:</b> Navy Crane Center 10 Industrial Hwy MS 82 Lester, Pa 19113-2090 Fax (610) 595-0812
<b>UIC:</b>	<b>Report No:</b>
<b>Activity:</b>	
<b>Crane No:</b>	<b>Category:</b> <input type="checkbox"/> SPS <input type="checkbox"/> GPS
<b>Crane Type:</b>	<b>Crane Manufacturer:</b>
<b>Location:</b>	<b>Weather:</b>
<b>Crane Capacity:</b>	<b>Hook Capacity:</b> <b>Weight of Load on Hook:</b>
<b>Fatality or Permanent Disability?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <b>Material/Property Cost Estimate:</b>
<b>Reported to NAVSAFECEN?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Accident Type:**

<input type="checkbox"/> Personal Injury	<input type="checkbox"/> Overload	<input type="checkbox"/> Derail	<input type="checkbox"/> Damaged Rigging Gear
<input type="checkbox"/> Load Collision	<input type="checkbox"/> Two Blocked	<input type="checkbox"/> Dropped Load	<input type="checkbox"/> Damaged Crane
<input type="checkbox"/> Crane Collision	<input type="checkbox"/> Damaged Load	<input type="checkbox"/> Other Specify _____	

**Cause of Accident:**

<input type="checkbox"/> Improper Operation	<input type="checkbox"/> Equipment Failure	<input type="checkbox"/> Inadequate Visibility
<input type="checkbox"/> Improper Rigging	<input type="checkbox"/> Switch Alignment	<input type="checkbox"/> Inadequate Communication
<input type="checkbox"/> Track Condition	<input type="checkbox"/> Procedural Failure	<input type="checkbox"/> Other Specify _____

**Chargeable to:**

<input type="checkbox"/> Track Walker	<input type="checkbox"/> Rigger	<input type="checkbox"/> Operator
<input type="checkbox"/> Maintenance	<input type="checkbox"/> Management/Supervision	<input type="checkbox"/> Other Specify _____

**Crane Function:**

<input type="checkbox"/> Travel	<input type="checkbox"/> Hoist	<input type="checkbox"/> Rotate	<input type="checkbox"/> Luffing	<input type="checkbox"/> Telescoping	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
---------------------------------	--------------------------------	---------------------------------	----------------------------------	--------------------------------------	--------------------------------	------------------------------

Is this accident indicative of a recurring problem?  Yes  No

If yes, list Accident Report Nos.: \_\_\_\_\_

**ATTACH COMPLETE AND CONCISE SITUATION DESCRIPTION AND CORRECTIVE/PREVENTIVE ACTIONS TAKEN AS ENCLOSURE (1). Include probable cause and contributing factors. Assess damages and define responsibility. For equipment malfunction or failure, include specific description of the component and the resulting effect or problem caused by the malfunction or failure. List immediate and long term corrective/preventive actions assigned and respective codes.**

<b>Preparer:</b>	<b>Phone and E-Mail</b>	<b>Code</b>	<b>Date</b>
------------------	-------------------------	-------------	-------------

<b>Concurrences:</b>		
	<b>Code</b>	<b>Date</b>
	<b>Code</b>	<b>Date</b>
<b>Certifying Official (Crane Accidents Only):</b>	<b>Code</b>	<b>Date</b>

<b>CONTRACTOR CRANE OR RIGGING OPERATION CHECKLIST</b>			
		YES	NO
1	Is the Certificate of Compliance, P-1, in the operator's cab (or in the contractor's on-site office for rigging operations) with the current operator's name listed?		
2	Is the crane/machine transited to and from the job site correctly? Are the OEM instructions for travel being followed?		
2	Does the operator know the weight of the load to be lifted?		
3	Is the load to be lifted within the crane/machine manufacturer's rated capacity in its present configuration?		
4	Are outriggers or stabilizers required?		
5	If outriggers are required, are outriggers fully extended and down, and the crane load off the wheels?		
6	Is the crane/machine level and on firm ground, if the ground is not firm is the crane/machine blocked?		
7	If blocking is required, is the entire surface of the outrigger pad supported and is the blocking material of sufficient strength to safely support the loaded outrigger pad?		
8	If outriggers are not used, is the crane/machine rated for on-rubber lifts by the manufacturer's load chart? If stabilizers are used and not outriggers and the wheels are not off the ground is this the correct setup in accordance with the OEM?		
9	Is the swing radius of the crane counterweight clear of people and obstructions and accessible areas within the swing area barricaded to prevent injury or damage?		
10	Has the hook been centered over the load in such a manner to minimize swing?		
11	Is the load well secured and balanced in the sling or lifting device before it is lifted more than a few inches?		
12	Is the lift and swing path clear of obstructions?		
13	If rotation of the load being lifted is hazardous, is a tag or restraint line being used?		
14	Are personnel prevented from standing or passing under a suspended load?		
15	Is the operator's attention diverted?		
16	Are proper signals being used at all times? Is the operator responding properly to the signals? Are radios used for blind lifts?		
17	Is the load lifted a few inches to ensure it is secure and balanced?		
18	Are empty hooks lashed or otherwise secured during travel to prevent swinging?		
19	Does the operator remain at the controls while the load is suspended?		
20	Do the operations ensure that side loading is prohibited?		
21	Are personnel prevented from riding on a load?		
22	Are start and stop motions in a smooth fluid motion (no sudden acceleration or deceleration)?		
23	If operating near electric power lines, are the rules and guidelines understood and adhered to?		
24	Is the lift a critical lift?		
25	If so, are all regulations understood and check-off sheets initialed and signed off?		
25.1	Are any overhead power lines in the vicinity?		
25.2	If so, are complex lift rules and 1926.550(a)(15) being followed?		
26	If pick and carry operations are allowed and performed, are OEM directions followed (e.g. rotation lock engaged, boom centered over front or rear, etc.)?		
26	When the crane/machine is left unattended, is it in a safe condition?		
27	Is rigging gear undamaged and acceptable for the application?		

FIGURE P-2 (1 of 2)

28	Does rigging gear meet applicable ASME or host country standards (e.g. ASME B30.9 for slings, B30.10 for hooks, B30.26 for hardware such as shackles, safety hoist rings, eyebolts, etc, B30.20 for below the hook lifting devices, etc.)?		
29	Is the rigging gear inspected prior to use?		
30	Is chafing gear used to protect slings (especially synthetic slings) and equipment from damage due to sharp corners and edges?		
31	Is the rigging gear used in accordance with its working load limit? Is the load limit visible?		
32	Are positive latching devices used on crane and rigging hooks, or are the hooks "moused"?		
Contractor:		Subcontractor:	
Location:			Date:
Notes:			
Signature of Contracting Officer's Representative:			

FIGURE P-2 (2 of 2)

Attachment A-7