

Task: \_\_\_\_\_  
 Location: \_\_\_\_\_  
 Site: \_\_\_\_\_

Name: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Time: \_\_\_\_\_



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## LIFTING OPERATIONS

### Barriers and Segregation Y N N/A

1. Have you verified that the barricading has 360 degree coverage to prevent unintended access?  Y  N  N/A
2. Is the exclusion zone large enough to protect people in the event of a load falling?  Y  N  N/A
3. Have you erected barricades as per the requirements in the site standard?  Y  N  N/A
4. Do barricaded areas have warning signs/tags?  Y  N  N/A
5. For authorised personnel in controlled zone, are safe distances, as per procedure, maintained? Eg. clear of the load, using tag line.  Y  N  N/A

### Lifting Plan Execution Y N N/A

6. Does the lift plan include confirmation of the actual and / or estimated weight of the load before proceeding with the lift?  Y  N  N/A
7. Have you determined that the weather conditions will allow for a safe lift? Wind, lightning etc  Y  N  N/A
8. Is the capacity of the lifting equipment indicated in the lift plan, including its turning radius and angle of lift?  Y  N  N/A
9. Does the work team have agreed communication protocols? Eg radio, spotter.  Y  N  N/A
10. Are the ground conditions stable for the position of the crane? Check wheels, outriggers, jack stands, bog mats  Y  N  N/A
11. Has the "drop zone" been identified, barricaded and communicated to keep personnel clear from the potential hazard?  Y  N  N/A

### Mechanical Integrity of Crane Y N N/A

12. Is the maximum safe working load indicated on the crane? Eg. SWL or WLL  Y  N  N/A

### Mechanical Integrity of Crane Y N N/A

13. Have you completed the pre-operational inspection that is specific to the crane, prior to it being used?  Y  N  N/A
14. Have you verified that the certification of the crane to be used for the lifting operation is valid and current?  Y  N  N/A

### Mechanical Integrity of Lifting Equipment Y N N/A

15. Does each item of lifting equipment have a current tag on it indicating it has been checked on a planned schedule?  Y  N  N/A
16. Have you inspected all the lifting equipment to ensure its safe for use? Eg. load rating, check for damage, cleanliness, current tag, compliance plate  Y  N  N/A

Comments: If a critical control can not be verified, please indicate the nature of the failure including the question(s) that you answered no.



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