

## MOBILE/TOWER CRANE INSPECTION CHECKLIST

<b>Site and Number:</b>	<b>Date:</b>
<b>Site Manager/Agent</b>	<b>Persons/Company undertaking works</b>
<b>Brief description of the work:</b>	
<b>Risk assessment completed?</b>	
<b>Method statement completed?</b>	
	<b>Sketch needed?</b>
<b>Check for 600mm clearance?(counterweight to wall/building)</b>	
<b>Weight of load:</b>	
<b>Record of weekly inspection [crane and ASL]:</b>	
<b>Record of 12 monthly thorough examination [crane]:</b>	
<b>Capacity [SWL] and condition [visual] of lifting gear:</b>	
<b>Test Certificate and 6 monthly examination [lifting gear]:</b>	
<b>Note:</b> The above reports should be looked at in detail and assurance sought that any points for action have been dealt with.	
<b>check]</b>	<b>[CTA and competence</b>
<b>Lifting Operations Co-ordinator:</b>	
<b>Who will control the lift?</b>	
<b>Crane driver:</b>	
<b>Banksman/slinger?</b>	
<b>Additional signaller?</b>	
<b>Safety briefing/Method Statement given by:</b>	

## MOBILE/TOWER CRANE PLANNING SHEET

Risk assessment needed?	Who provides?
Method Statement needed?	Who provides?
	Sketch needed?
Check for 600mm clearance?(counterweight to wall/building)	
Weight of load:	
Position of C of G of load:	
Nature of load:	
Max. height of lift:	Max. radius of lift:
Overhead obstructions? [e.g., cables, buildings]:	
Ground conditions [permissible capacity]:	
Support plates or timbers needed?	Voids or traps present?
Underground services checked:	Public interface:
Access and egress of crane?	
Who selected the crane?	
Who checked/designed the foundation?	