

## Construction Site Tower Crane Report

<b>Prime Contractor:</b>		<b>Superintendent:</b>	
<b>Project:</b> NOP#		<b>Address:</b>	
<b>Crane Leassor:</b>		<b>Supervisor:</b>	
<b>Crane Owner:</b>		<b>Contact:</b>	
<b>Crane Operator:</b>		<b>Certified: (qualification)</b>	
<b>Crane Erector / Company:</b>		<b>Crane Erector Supervisor:</b>	
<b>Crane Make:</b>	<b>Model:</b>	<b>Serial #:</b>	
<b>Crane as erected:</b>	<b>Standard: Yes / No</b>	<b>Certified by:</b>	
<b>Mast Height:</b>	<b>Standard: Yes / No</b>	<b>Non-standard certified by:</b>	
<b>Jib Length:</b>	<b>Standard: Yes / No</b>	<b>Non-standard certified by:</b>	
<b>Counter-Jib Length:</b>	<b>Standard: Yes / No</b>	<b>Non-standard certified by:</b>	
<b>Operator cab (as per manufacturer): Yes / No</b>		<b>Operator cab location:</b> ft./ m	
<b>Non-standard (cab location) certified drawing on site:</b>		<b>Operator cab certified by:</b> <b>Date:</b>	
<b>Overlapping cranes: Yes / No</b>		<b>Overlapping cranes procedures: Yes / No</b>	
<b>Hoisting package:</b>	<b>Standard: Yes / No</b>	<b>Non-standard certified by:</b>	
<b>Counterweight required:</b>		<b>Counterweight installed:</b>	
<b>Anchor bolts torqued to:</b> foot lbs.		<b>Mast bolts torqued to:</b> foot lbs.	
<b>Slewing ring bolts torqued to:</b>		<b>Date of torquings:</b>	
<b>Tip capacity:</b> lbs.@ ft.	<b>Tip limit set at:</b> lbs.@ ft.		
<b>Line pull (max):</b> lbs.@ ft	<b>Line pull set at:</b> lbs.@ ft.		
<b>Test blocks required:</b>			<b>Test blocks on site: Yes / No</b>
<b>Soils report by:</b>		<b>Certified by:</b>	<b>Date:</b>
<b>Foundation design by:</b>		<b>Certified by:</b>	<b>Date:</b>
<b>Rebar inspection certified by:</b>		<b>Prior to pour certificate by:</b>	
<b>Concrete report:</b>		<b>Concrete strength at time of erection:</b> MPa @ days	
<b>NDT by: (components identification on report)</b>	<b>NDT certification by:</b>		<b>Date:</b>
<b>Repairs by:</b>	<b>Repairs certified by:</b>		<b>Date:</b>
<b>Manufacturer's manual on site:</b>		<b>Inspection and maintenance recording system on site (Log Book):</b>	

<b>Reshoring plans required:</b>		<b>Reshoring design by:</b>	
<b>Bracing required:</b>		<b>Bracing design by:</b>	
<b>Written lockout:</b>		<b>Signed:</b>	<b>Dated:</b>
<b>Fall protection plans: (erector, operator, technician)</b>		<b>Signed:</b>	<b>Dated:</b>
<b>High angle evacuation procedures:</b>		<b>Signed:</b>	<b>Dated:</b>
<b>Proximity to high voltage lines:</b>		<b>30M33:</b>	
<b>Radio frequency:</b>			
<b>MHz:</b>		<b>CTCSS Tone:</b>	
<b>Vertical clearance (min. 1m): Yes / No</b>		<b>Lateral clearance (0.3m) Yes / No</b>	
<b>GFI required: (&gt;600 volts required)</b>		<b>Indicator lights installed:</b>	
<b>Delta system requires GFI:</b>		<b>Star system not required:</b>	
<b>Rigging by:</b>		<b>Rigging annual inspection report on site:</b>	
<b>Rating:</b>			
<b>Signage Size:</b>		<b>Type:</b>	
<b>Anemometer:</b>		<b>Max. operating wind speed:</b>	
<b>Deadman controls:</b>		<b>Fire extinguisher:</b>	
<b>Heater in cab:</b>		<b>Horn (audible to workers):</b>	
<b>Trolley in limit:</b>	<b>Trolley out limit:</b>		<b>Trolley up</b>
<b>Load moment:</b>	<b>Load moment trolley:</b>		<b>Lime pull:</b>
<b>Hoisting rope (load line) req'd: Diameter in inches/mm:</b>		<b>Hoisting rope checked by:</b>	
<b>Hoist line shortening req'd: Yes / No</b>		<b>Letter from manufacturer on site for not shortening line: Yes / No</b>	
<b>Trolley line req'd:</b>		<b>Trolley line checked by:</b>	

This crane has been inspected, repaired, erected, and tested in accordance with the manufacturer's specifications, professional engineer, applicable standards, and the Occupational Health and Safety Regulation.

Erector: \_\_\_\_\_ Signature: \_\_\_\_\_ date: \_\_\_\_\_

Erector Supervisor: \_\_\_\_\_ Signature: \_\_\_\_\_ date: \_\_\_\_\_

Professional Engineer: \_\_\_\_\_ Signature: \_\_\_\_\_ date and seal: \_\_\_\_\_  
(Non-standard cranes only)