Client Name: _____

Project Name: _____

Contract No.: _____

Critical Lift Permit Form

Date: _____ Start Date: _____ Expected Completion Date:_____

Description of Job: _____ Site Supervisor Name: _____

Section A. Load Weight		
Item	**Weight**	
Load to be moved		Lb/Kg
Allowance for unaccounted material		Lb/Kg
Allowance for any liquid		Lb/Kg
Allowance for Other		Lb/Kg
Total Load Weight		Lb/Kg
List method used to determine calculated weight of load, if unknown, estimate load and install dynameter:		

Section B. Rigging Weight Information				
Item	**Weight (Lift Crane)**		**Weight (Tail Crane)**	
Block		Lb/Kg		Lb/Kg
Headache ball		Lb/Kg		Lb/Kg
Lifting Bar/Special Lift Device		Lb/Kg		Lb/Kg
Slings		Lb/Kg		Lb/Kg
Shackles		Lb/Kg		Lb/Kg
Jib (Erected or Stowed)		Lb/Kg		Lb/Kg
Load line		Lb/Kg		Lb/Kg
Total Rigging Weight		Lb/Kg		Lb/Kg
Total Lift Weight = Total Load Weight + Total Rigging Weight				Lb/Kg

Section C. Sling/Lift Device Selection

Sling size: _____ Length: _____ Capacity of each: _____

Sling type: _____ Sling Configuration (Circle one): Vertical Choke Basket Bridle

Number of slings required: _____ Total Capacity Based on Configuration): _____

Number of shackles required: _____ Capacity of each: _____

Spreader Bar I.D. No.: _____ Spreader Bar Capacity: _____ Spreader Bar Cert. Date:_____

Section D. Crane Information		
Crane Information	**Lift Crane**	**Tail Crane**
Crane Type		
Manufacturer		
Model #		
Capacity		
Boom length		
Operating radius		
Percent of manufacturers' load chart		
Crane capacity in this configuration		

Initial Orientation of the Lift Relative to the Crane

Lift Crane (Circle One): Front Side Rear

Tail Crane (Circle One): Front Side Rear

Swing Orientation of the Lift Relative to the Crane

Lift Crane (Circle One): Front Side Rear

Clearances: _____

Tail Crane (Circle One): Front Side Rear

Clearances: _____

Are mats required? ○ Yes ○ No

If yes, what size? _____

Are there limitations on speed of lift and maneuver? _____

Has a sketch been completed? ○ Yes ○ No

Sketch(es) on the following pages should include at a minimum:

1. Initial Orientation of the lift relative to the crane (s)
2. Swing orientation of lift relative to the crane (s)
3. Clearances to include height and swing limitations
4. Dimensions of the load
5. Weight of load
6. Attachment points/methods
7. Capacities
8. Sling angles for rigging
9. Proximity to power lines or other energized facilities
10. Load Path

Client Name: _____

Project Name: _____

Contract No.: _____

A competent, designated person may approve in their absence – telephone approvals are not acceptable.

Advanced Rigger Signature:

Print Name: _____ Signature: _____ Date: _____

Crane Operator Signature:

Print Name: _____ Signature: _____ Date: _____

Site Supervisor Signature:

Print Name: _____ Signature: _____ Date: _____

Lift Director Signature

Print Name: _____ Signature: _____ Date: _____

Signatures include approval of the sketches following this page

Client Name: _____

Project Name: _____

Contract No.: _____



