



# LIFTING PLAN

NOTE: A LIFT PLAN SHOULD BE COMPLETED PRIOR TO MOBILIZATION OF EQUIPMENT AND RIGGING

|                   |  |
|-------------------|--|
| Location:         |  |
| Load Description: |  |
| Lift Description: |  |
| Crane Operator:   |  |
| Supervising Lift: |  |
| Coordinator:      |  |
| Date of Lift:     |  |

## A. WEIGHT

|   |                    |
|---|--------------------|
| 1. Equipment Conditions:                            | New [ ] Used x [ ] |
| 2. Weight Empty:                                    | 0 LBS.             |
| 3. Weight of Headache Ball:                         | 0 LBS.             |
| 4. Weight of Block:                                 | 0 LBS.             |
| 5. Weight of Lifting Bar:                           | 0 LBS.             |
| 6. Weight of Slings and Shackles:                   | 0 LBS.             |
| 7. Weight of Jib:                                   | 0 LBS.             |
| [ ] Erect [ x ] Stored                              |                    |
| 8. Weight of Headache Ball on Jib:                  | 0 LBS.             |
| 9. Load of Cable:                                   | 0 LBS.             |
| 10. Allowance for Unaccounted Material or Equipment | 0 LBS.             |
| 11. Other: ____ DOAS ____                           | 0 LBS.             |

Total Weight: 0 LBS.

|                        |                  |
|------------------------|------------------|
| Source of Load Weight: | Specs / Drawings |
| Weights Verified By:   | Specs and Crane  |

## B. JIB

|                           |                  |
|---------------------------|------------------|
| Erected [ ] Stored [ x ]  |                  |
| 1. Is Jib to be used:     | Yes [ ] No [ X ] |
| 2. Length of Jib:         | 0 FT.            |
| 3. Angle of Jib:          | 0 DEG.           |
| 4. Rated Capacity of Jib: |                  |
| (From Chart)              | 0 LBS.           |

## C. Crane Placement

|  |              |
|--|--------------|
| 1. Any Deviation From Smooth Solid Foundation in the Area? | No           |
| 2. Electrical Hazards in the Area?                         | N/A          |
| 3. Obstacles or Obstructions to Lift and Swing?            | N/A          |
| 4. Swing Direction and Degree (Boom Swing)                 | East to west |

## D. Cable

|                           |   |
|---------------------------|---|
| 1. Number of Parts Cable: | 0 |
| 2. Size of Cable:         | " |

## E. Sizing of Slings

|                                     |   |
|-------------------------------------|---|
| 1. Sling Selection                  |   |
| a. Type of Arrangement              | . |
| b. Number of Slings and Weight      | . |
| c. Sling Size                       | . |
| d. Sling Length                     | . |
| e. Rated Capacity of Sling          | . |
| Shackle Selection Weight and Number | . |
| a. Pin Diameter (inches)            | . |
| b. Capacity (tons)                  | . |
| Shackle Attached To load            |   |
| a. Number and Weight                | 0 |
| b. Lifting Lugs Load                |   |
| c. Weight of the rigging            | . |

## F. CRANE

|   |              |
|---|--------------|
| 1. Type of Crane  | Terex RT 760 |
| 2. Crane Capacity   | 60 Ton       |
| 3. Lifting Arrangement  |              |
| a. Max Distance, Center of Load to Center Pin of Crane                    |              |
| b. Length of Boom   |              |
| c. Angle of Boom At Pick-up   | 0°           |
| d. Angle of Boom At Set   | 0°           |
| e. Rated Capacity of Crane Under Severest Lifting Conditions (From Chart) |              |
| 1. Over Rear  | 0            |
| 2. Over Front   | 0            |
| 3. Overside   | 0            |
| 4. From Chart--Rated Capacity of Crane For This Lift                      | 0            |
| 5. Max. Load On Crane   | 0            |
| 6. Lift is  | #DIV/0!      |
| 7. max lift weight for 75% of Crane's Capacity                            | 0            |

## G. PRE-LIFT CHECK LIST

|                                  |          |
|----------------------------------|----------|
|                                  | YES / NO |
| 1. Matting Acceptable?           | N/A      |
| 2. Outriggers Fully Extended?    | N/A      |
| Crane in Good Condition?         | Y        |
| 4. Swing Room?                   | Y        |
| 5. Head Room Checked?            | Y        |
| 6. Max Counterweights Used?      | Y        |
| 7. Tag Line Used?                | Y        |
| 8. Experienced Operator?         | Y        |
| 9. Experienced Flagman Assigned? | Y        |
| 10. Experienced Rigger?          | Y        |
| 11. Load Chart in Crane?         | Y        |
| 12. Wind Conditions: ~ 15 MPH    |          |
| 13. Tele Handler Inspected By:   |          |
| 14. Functional Test of Crane By: |          |

Special Instructions or Restrictions for Crane, Rigging, Lift, Etc. \_\_\_\_\_

Tag Lines and Rigger; Gusting winds up to 20 mph - use anemometer and stand-down if winds > 25 mph

|                                  |                               |
|----------------------------------|-------------------------------|
| Diagram Crane and Load Placement | Diagram Rigging Configuration |
|                                  |                               |

\* Multiple Crane Lifts Require a Separate Lift Plan For Each Crane.  
\* Any Changes In The Configuration Of The Crane, Placement, Rigging, Lifting Scheme.  
Etc., Or Changes in Any Calculations Require That A New Lift Plan Be Developed.

|                             |                              |       |
|-----------------------------|------------------------------|-------|
| X                           | Date:                        | Date: |
| Signature of Job Supervisor | Signature - Plan Checked By: |       |