

## MOBILE CRANE PERMIT

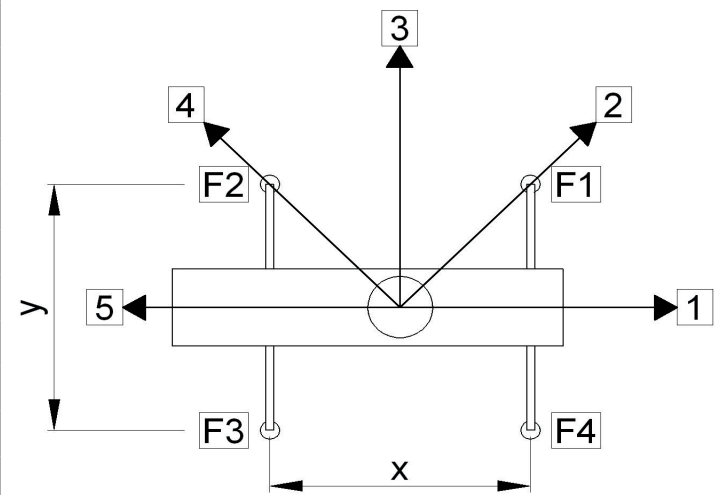
MOBILE CRANE PERMIT (Complete both pages)						
NOTE: MINIMUM 3 WORKING DAYS REQUIRED FOR ENGINEERING ASSESSMENT/APPROVAL						
Port:		Company Name:				
Location:		Contact Name:				
Crane Registration No.		Contact Phone:				
Crane Driver Name and Task Description :						
NO WORK OUTSIDE THIS SCOPE MAY BE PERFORMED UNDER THIS PERMIT						
EXPECTED WORK TIMING	Start Time:		Day:		Date:	
	Finish Time:		Day:		Date:	
REQUEST AND APPROVAL SIGNATURES						
Approved? YES	NO	Tasports Engineer:	Time:	Date:	Signature:	
Approved? YES	NO	Tasports Operations:	Time:	Date:	Signature:	
Detail additional safety precautions to be observed:						
Detail specific setup details if required:						
Is work to be carried out in leased area? YES		NO		Is Tasports Supervisor sign off required? YES		NO
I acknowledge receipt of this permit and understand fully the conditions and precautions required (incl. standard conditions below)						
Permit Holder:		Time:	Date:	Signature:		
If contractor - Company Name:						
Address:				Phone No.:		
Tasports Supervisor contacted and works permitted to commence.						
Tasports Supervisor:		Time:	Date:	Signature:		
WORK COMPLETED						
All work associated with this permit is complete as per the permit and safe and no further work is permitted.						
Permit Holder:		Time:	Date:	Signature:		
Tasports supervisor contacted and acknowledges work is complete.						
Tasports Supervisor:		Time:	Date:	Signature:		
Standard Conditions <b>IT IS THE RESPONSIBILITY OF THE APPLICANT TO ENSURE THE FOLLOWING:-</b> <ol style="list-style-type: none"> <li>1. The crane is set up as per approval including specific positioning if required</li> <li>2. All personnel involved in the lift (including relief drivers) are briefed on the conditions set out in the lift approval documents</li> <li>3. The crane is operated within the radius range stated on the original application</li> <li>4. The weight of the lift is not to exceed that specified in the original application</li> <li>5. If any detail of the lift changes the operator is to notify Tasports so as further assessment can be undertaken prior to approval to proceed with the lift</li> <li>6. All safety precautions and consideration be made on site for pedestrian and vehicular traffic while the crane is on site</li> <li>7. All safety regulations relating to crane operations must be adhered to at all times</li> <li>8. "Near Miss" and incidents MUST be reported to Tasports immediately</li> <li>9. Any damage to Tasports assets during the crane operation will be the responsibility of the applicant</li> </ol>						

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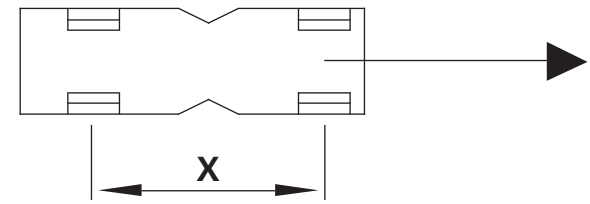
The following details shall be completed by the crane company and submitted to Tasports for assessment via email to [cranepermit@tasports.com.au](mailto:cranepermit@tasports.com.au)

### NO WORK OUTSIDE THIS SCOPE MAY BE PERFORMED UNDER THIS PERMIT

Crane Make:		Crane Model:		Crane Capacity:	
Maximum Lift					
Lift Radius					
Outrigger Spacing (x)					
Outrigger Spacing (y)					
Travelling Axle Loads					
Axle	t				
		Outrigger Load (t)			
Jib Pos	F1	F2	F3	F4	
1					
2					
3					
4					
5					

OR

### PICK & CARRY CRANE LOADING DETAILS:

Crane Make:		Crane Model:		Crane Capacity:	
Maximum Lift					
Jib Length (from front axle)					
Max. Front Axle Load					
Max. Rear Axle Load					
Axle Spacing (x)					

LOCATION DATA	Y	N	Y	N
Is there suitable safe access to the lift area?			Is the ground stable where the crane is to be set up?	
Is the crane to be set up on a wharf deck?			Are there other operations in the lift area?	
Is the crane to be set up adjacent to seawall?			Will lift area be barricaded to prevent pedestrian access?	

### SKETCH OF PROPOSED SETUP LOCATION