



MOBILE CRANE OPERATOR EMPLOYER EVALUATION ITEMS "Vertical Lift & Place"

OPERATOR'S NAME: _____

EVALUATION DATE: _____

EMPLOYER: _____

CCO CERTIFICATION #: _____

CRANE MAKE: _____

CRANE MODEL #: _____

LMI TYPE / MODEL: _____

CRANE CATEGORY: _____

VERTICAL LIFT & PLACE

Successful Completion? YES NO

Set-up the LMI with the following parameters:

Outriggers: Fully Extended & Set 50% Extended & Set 0% Extended & Set On Rubber

Quadrant: 360 degrees Front Rear N/A

Main Boom Length: _____

Main Boom Angle: _____

Radius: _____

Jib: _____ Stowed: Erected: Stored: _____ Offset: _____

Auxiliary Boom Head Installed: Yes No

Main Hoist Parts of Line: 1 2 3 4 5 6 Other: _____ parts

Auxiliary Hoist Parts of Line: 1 2 3 4 N/A

Counterweight: Fixed Installed _____, _____, _____, _____, _____, _____

Load Description: _____

Load Weight: _____ lbs.

Vertical Lift Scenario: Lift and place a load from one location to another unguided and no signals.

Observation:

- Correct LMI set-up
- Perform pre-shift inspection
- Follow up inspection
- Follows voice signals correctly
- Smooth operation
- Operational control
- Other: _____
- Other: _____
