



MOSAIC FERTILIZER LLC
CRANE SUSPENDED MAN BASKET PERMIT

Appendix B
Issued: 5/14/07

THIS CHECKLIST MUST BE COMPLETED AND SIGNED BY ALL PARTIES WHERE INDICATED
PRIOR TO THE LIFTING OF PERSONNEL IN A CRANE SUSPENDED MAN BASKET

GENERAL INFORMATION

SUPERVISOR \_\_\_\_\_ CREW \_\_\_\_\_
START DATE \_\_\_\_\_ DURATION \_\_\_\_\_
PLANT \_\_\_\_\_ LOCATION \_\_\_\_\_

MAINTENANCE/CONTRACTOR SUPERVISOR JUSTIFICATION

DESCRIBE THE CONDITIONS THAT REQUIRE THE USE OF A CRANE SUSPENDED MAN BASKET
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\_\_\_\_\_
\_\_\_\_\_

EXPLAIN WHY ALTERNATIVE METHODS WOULD CREATE A GREATER HAZARD
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\_\_\_\_\_

MANAGER APPROVAL

VERBAL OR WRITTEN APPROVAL IS GIVEN FOR A CRANE SUSPENDED MAN BASKET LIFT PLAN
TO BE DEVELOPED FOR THE CONDITIONS LISTED ABOVE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/ DATE
SIGNATURE

CRANE CREW/CONTRACTOR SUPERVISORS CHECKLIST

BOOM ANGLE \_\_\_\_\_ GROSS CAPACITY \_\_\_\_\_
BOOM LENGTH \_\_\_\_\_ LESS DEDUCTIONS \_\_\_\_\_
RADIUS \_\_\_\_\_ NET CAPACITY \_\_\_\_\_ (MUST BE 3000LB OR MORE)

BASKET AND MAXIMUM LOAD IS 1500 LB.

1. CRANE CHECKLIST

- PLATFORMS POSTED LOAD CAPACITY DOES NOT EXCEED 50% OF CRANES RATED CAPACITY FOR MAXIMUM INTENDED BOOM LENGTH AND RADIUS.
LOAD LINE AND BOOM HOISTS ARE POWER CONTROLLED LOWERING (NO FREE FALL).
LOAD LINE CAPABLE OF SUPPORTING 7 TIMES THE MAXIMUM INTENDED LOAD (10 TIMES FOR ROTATION RESISTANT ROPE).
LOAD HOOK IS LOCKABLE TYPE (NOT SPRING LOADED SAFETY LATCH) OR HOOK REPLACED WITH ALLOY SHACKLE WITH BOLT, NUT AND PIN.
CRANE IS EQUIPPED WITH BOOM ANGLE INDICATOR, AND IT HAS BEEN CHECKED FOR ACCURACY.

- HYDRAULIC BOOM CRANES EQUIPPED WITH BOOM LENGTH OR LOAD RADIUS INDICATOR.
- ANTI-TWO BLOCK DEVICE IS OPERATIONAL.
- OUTRIGGERS FULLY DEPLOYED. GROUND CONDITIONS ACCEPTABLE, AND CRANE UNIFORMLY LEVEL WITH-IN 1%, OUTRIGGERS LOCKED IF EQUIPPED.

**2. PLATFORM**

- EQUIPPED WITH OVERHEAD PROTECTION (WHEN EMPLOYEES ARE EXPOSED TO FALLING OBJECTS), IN-SWINGING GATE, INTERIOR HAND HOLDS AND MEETS ALL REQUIREMENTS OF OSHA 1926.550(g)
- TOTAL LOAD OF PERSONNEL, TOOLS AND MATERIALS WITHIN POSTED CAPACITY OF PLATFORM.
- TOOLS AND EQUIPMENT SECURED IN PLATFORM.
- FALL PROTECTION REQUIRED FOR ALL PERSONNEL IN THE BASKET.

**3. RIGGING AND SETUP**

- WIRE ROPE SLING IS STAINLESS STEEL, EYES EQUIPPED WITH THIMBLES AND USED EXCLUSIVELY FOR PERSONNEL PLATFORMS.
- SAFETY FACTOR OF ALL LIFTING GEAR IS AT LEAST 5 TIMES THE MAXIMUM INTENDED LOAD.

**4. TRIAL LIFT AND PROOF TEST**

- A 5 MINUTE TRIAL LIFT WITHOUT PERSONNEL WAS PERFORMED THROUGHOUT THE ENTIRE RANGE OF PLATFORM TRAVEL WITH A PROOF LOAD OF 200% OF PLATFORM POSTED CAPACITY.
- PLATFORM INSPECTED FOR CRACKS AND DEFORMED MEMBERS PRIOR TO AND AFTER TRIAL LIFT.

**5. FINAL CHECK**

- HOIST ROPES AND SLINGS FREE OF KINKS, TWIST, SLACK, AND ARE PROPERLY SEATED ON SHEAVES AND DRUMS.
- ATTACHMENT POINT CENTERED OVER PLATFORM.
- CRANE, RIGGING, PLATFORM, JOB AREA, INSPECTED AND FOUND TO BE FREE OF ANY VISUAL SAFETY HAZARDS.
- COMMUNICATION METHOD: VERBAL \_\_\_\_\_ RADIO \_\_\_\_\_ HAND SIGNALS \_\_\_\_\_

THE ITEMS LISTED IN SECTION 1 THRU 5 OF THIS PART HAVE BEEN CHECKED AND FOUND TO BE ACCEPTABLE. I AM KNOWLEDGEABLE OF THE MOBILE CRANE PROCEDURE AND REGULATORY REQUIREMENTS FOR PERSONNEL PLATFORMS AND I AM SATISFIED THAT ALL CONDITIONS HAVE BEEN MET.

\_\_\_\_\_  
SIGNATURE                                          DATE  
**SUPERVISOR**

\_\_\_\_\_  
SIGNATURE                                          DATE  
**OPERATOR**

\_\_\_\_\_  
SIGNATURE      DATE  
**RIDER**

\_\_\_\_\_  
SIGNATURE      DATE  
**RIDER**

\_\_\_\_\_  
SIGNATURE      DATE  
**SIGNAL PERSON**