

Department of Labor and Industries  
 Division of Occupational Safety & Health  
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## Mobile Cranes/Derricks Worksheet for Construction Industry

Name of Owner (Not Lessee) <b>CRANE OWNER INC</b>		Permanent Sticker ID # <b>C0000001</b>	Inspection Exp. Date <b>1/21/2013</b>	Proof Load Test Exp. Date <b>1/21/2013</b>
Mailing Address <b>123 SUNNY LANE</b>		City <b>ANYWHERE IN</b>	State <b>WA</b>	Zip+4 <b>98000</b>
Phone Number <b>253-123-4567</b>				

Owner's Email Address: **lollilu@net.com**

Is this Crane Leased or Rented  Yes  No If Yes, Write Lessee's Name and Address below:  Send Certification to this address

Description: <input type="checkbox"/> Lattice Boom <input checked="" type="checkbox"/> Hydraulic Boom <input type="checkbox"/> Articulating Boom <input type="checkbox"/> Derrick <input type="checkbox"/> Other _____				Owner's ID # <b>BMW36000</b>	
Manufacturer <b>GROVE</b>		Max Rated Capacity in Lbs <b>110000</b>	Model Number <b>RT85513</b>	Serial Number <b>7870219</b>	Hr Mtr. Reading <b>19730</b>
Boom Length at Time of Inspection: <b>37'-115'</b>		Jib Length at time of Inspection: <b>35'-60'</b>		If Derrick, state type, Breast, Stiff-leg, A-Frame, etc. <b>Rough Terrain Hydraulic Extendable</b>	

Wire Rope	No. Parts	Diameter	No. Strands	Wires per Strand	Rotation Res. (Yes/No)	Breaking Strength
Main Hoist	4	3/4	19	19	yes	64600
Whip	1	3/4	18	19	yes	64800
Boom						
Boom Pendants						

*The following items must be inspected where applicable: (if not applicable, so indicate)*

	Accept	N/A		Accept	N/A
a) Chassis, Tires, Steering	X		p) Ladders, Hand Holds	X	
b) Fluid Leaks & Fluid Levels	X		q) Brakes, Hoist, Boom, Turret, etc.	X	
c) Guards, Rails, Windows	X		r) Load Charts and Operator's Manual	X	
d) Outriggers, Stabilizers, Pads	X		s) Housekeeping / Maint. & Insp. Records	X	
e) Rotation Bearing / Swing Lock	X		t) Boom including Wear Pads if applicable	X	
f) Hook Rollers and Load Rollers	X		u) Boom Extensions, Jib	X	
g) Counterweights per Manufacturer	X		v) Structural Welds	X	
h) Data Plates / Warning Signs, Decals	X		w) Boom and Hoist Sheaves	X	
i) Controls / Functions / Labeled	X		x) Pennant Bars / Cables and Links		X
j) Lights / Signals / Horn	X		y) Operational Aids / Safety Devices	X	
k) Gauges working	X		z) Anti-Two-Block Device	X	
l) Backup Alarm	X		aa) Limit Switches	X	
m) Fire Extinguisher (10BC min.)	X		bb) Hook(s)	X	
n) Electrical Equipment	X		cc) Wire Rope Becketts, Pins	X	
o) Hydraulic Systems	X		dd) Hoist Drum	X	

**FREELY SUSPENDED PROOF LOAD TEST REQUIRED:** Proof load test for cranes must be based on manufacturer's load ratings and must be at least 100% but not exceeding 110% of the rated capacity. Derricks must be proof load tested in excess of safe working load: for capacities up to 20 tons = proof load 25% in excess; 20 tons to 50 tons = Proof -load 5 tons in excess; over 50 tons = 10% in excess.

Main or Whip	Boom Length (Feet)	Radius (Feet)	Boom Angle (Degrees)	Rated Capacity (Lbs)	Total Deductions (Lbs)	Net Rated Capacity (Lbs)	Test Load (Lbs)	Load Test (%)	Crane Configuration & Test Range
Main	45	23.5	48.7	56400	2600	53794	56400	100	360 degrees 4 outriggers 4 part
Whip	115	36.3	36.3	5649	2606	3043	5649	100	360 degrees 4 outriggers

Was This Crane Tested on Rubber? Yes  (List parameters below) No

Means of Application of Proof Load Test see WAC 296-155-53200(7)(f)  Certified Test Weights  Weights Using Currently Calibrated Scale  
 ("Known weights" is not acceptable)

Remarks: Additional sheets attached? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Crane Operator's Name (please print) <b>Sonny Jones</b>
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I hereby certify the above tests and/or examinations have been conducted in accordance with the Washington State Safety Standards for Construction Operations, WAC 296-155. A copy of this worksheet will be used as a temporary certificate until the annual certification is issued. This temporary certificate is valid for 30 days after the date of this inspection

Date <b>1/21/12</b>	Accredited Certifier's Name (please print) <b>Ron B. Chase</b>	Accredited Certifier's ID # <b>000002</b>
Certifier's Phone # <b>253-012-3456</b>	Address <b>2B Do Drop Inn, Someplace, WA 98123</b>	Signature of Accredited Certifier <i>Ron B. Chase</i>