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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Workplace: |  | | | | | | | | | Location: | | |  | | | | | | | | | | |
| Service Provider company: | | | | | | |  | | | | | | | | | | | | | | | | |
| Planned activity dates: | | | Start date: | | | | | |  | | | Finish date: | | | | | |  | | | | | |
| **Personnel details** | | | | | | | | | | | | | | | | | | | | | | | |
| **Role** | | | | | | | | | | **Name** | | | | | | | **Contact details** | | | | | | |
| Mirvac Activity Coordinator/ Engineer: | | | | | | | | | |  | | | | | | |  | | | | | | |
| Service Provider Crane Coordinator/Supervisor: | | | | | | | | | |  | | | | | | |  | | | | | | |
| Third Party Engineer: | | | | | | | | | |  | | | | | | |  | | | | | | |
| Nominated Mirvac Representative: | | | | | | | | | |  | | | | | | |  | | | | | | |
| **Associated documents** | | | | | | | | | | | | | | | | | | | | | | | |
| Work Box Permit, Electrical Isolation/Energization, Mobile Crane Permit, Risk and Opportunity Register | | | | | | | | | | | | | | | | | | | | | | | |
| **Part A – Activity planning** | | | | | | | | | | | | | | | | | | | | | | | |
| **Tower crane documents** | | | | **Yes No**  **N/A** | | | | **Erection, climb, dismantle planning** | | | | **Yes No**  **N/A** | | | **Operational requirements** | | | | | | **Yes No**  **N/A** | | |
| The tower crane base design has been received and has been certified by a suitably qualified engineer | | | |  | | | | A specific Lift Plan has been developed and received | | | |  | | | The tower crane operations manual has been received | | | | | |  | | |
| The tower crane base design has been reviewed by a third party suitably qualified engineer | | | |  | | | | Geotechnical report has been provided for mobile crane outrigger locations (DCP test), The report is to include any existing service location | | | |  | | | A Plant Risk Assessment for the Tower Crane has been received. | | | | | |  | | |
| Tower crane sign design has been certified by a suitably qualified engineer | | | |  | | | | Mobile crane documentation received. Annual plant registration, service history, plant hazard assessment, Crane Safe inspection | | | |  | | | HRWL & Third-Party competency verification for the tower crane crew have been received.  Note: Reverification required if the operator has been away from / absent from operating the crane for more than 6 months | | | | | |  | | |
| Plant design registration has been verified | | | |  | | | | Secondary subcontractor insurances have been received | | | |  | | | JSEA/SWMS – Operation of Tower Crane has been received for review | | | | | |  | | |
| Annual plant registration certificate has been provided | | | |  | | | | HRWL and VOC’s for Mobile Crane operatives have been received | | | |  | | | JSEA/SWMS – Maintenance of Tower Crane has been received for review | | | | | |  | | |
| Tower crane base design has been registered with Regulatory Authority | | | |  | | | | SWMS for the Erection or Climbing or Dismantle of the tower crane has been received for review and approval | | | |  | | | JSEA/SWMS- Rigging and Dogging Loads has been received for review | | | | | |  | | |
| Non- Destructive Testing (NDT) reports have been received. Report includes an extensive list of the components tested accompanied by photographs | | | |  | | | | SWMS for the Set up and Operation of Mobile Crane has been received for review and approval | | | |  | | | Communications have been arranged (Two Way Radio secure channel, back up arrangements). | | | | | |  | | |
| Non- Destructive Testing (NDT) has been reviewed by a third party suitably qualified engineer | | | |  | | | | JSEA/SWMS/Procedure for Rescue Fall from Height | | | |  | | | Tower Crane Operator familiarisation/ crane induction has been arranged | | | | | |  | | |
| Hoist and luffing rope inspection reports have been received | | | |  | | | | Traffic Management, permits and control plan have been received. | | | |  | | | Maintenance requirements/ procedures have been received | | | | | |  | | |
| Where applicable a 10 year / 25-year Crane Inspection Report has been received | | | |  | | | | Mobile Crane Lifting equipment register has been received | | | |  | | | Lifting equipment inspection regimes have been arranged | | | | | |  | | |
| Electrical compliance inspection has been received | | | |  | | | | Tower Crane company Lifting equipment register received. | | | |  | | | The rescue procedure/operator rescue training record has been submitted and approved (Gotcha kit) | | | | | |  | | |
| Crane Safe Inspection has been arranged for commissioning | | | |  | | | | Working at Height equipment register received (harnesses, rescue kits etc.) | | | |  | | | A 2.5kg ABE fire extinguisher is in the cabin | | | | | |  | | |
| Aviation requirements have been assessed | | | |  | | | | Electrical isolations have been arranged | | | |  | | | A lockable access gate is fitted | | | | | |  | | |
| Crane base/tower security has been reviewed for adequacy. (Must be a minimum of 3m non- climbable hoarding). Where attached to crane, must be engineered system with engineered fixings. Design has been inspected and certified by a suitably qualified engineer | | | |  | | | | HRWL for Rigging crew and associated competencies i.e. Work at Height Awareness have been received | | | |  | | | Entry hatches to the cabin are lockable | | | | | |  | | |
| Fire suppression or direct injection system systems have been arranged. Fixed system and Portable | | | |  | | | | Work Box Use Checklist has been prepared | | | |  | | | Access points are clearly signed “No Entry – Authorised Access Only” or the like | | | | | |  | | |
| The ancillary items (Kibbles, Brick Cage, chains etc.) have independent inspection undertaken and reports/certification has been received | | | |  | | | | Exclusion zones have been agreed and are adequate. An activity layout plan has been developed. This plan indicates, assembly, delivery, exclusion zones | | | |  | | | Sanitary hygiene processes and disposal for operator body fluids are in place | | | | | |  | | |
| Tower crane supplier/installer and design engineers PI insurance have been received | | | |  | | | | Erection communication arrangements i.e. letter box drop, site notification | | | |  | | | Processes are in place to monitor weather conditions | | | | | |  | | |
| Non- Destructive Testing (NDT) reports have been received for climbing frame inclusive of flippers and base pads | | | |  | | | | Pre- inspection of the tower crane and components such as climbing frame, ancillary items have been arranged | | | |  | | | The person in charge of erection and climbing of a tower crane has experience in carrying out work on the type of crane and holds a certificate of competency as a rigger, class 5 or 6, endorsed for tower cranes | | | | | |  | | |
| Climbing frame and crane tie design has been received and certified by a suitably qualified person | | | |  | | | | Emergency / rescue procedures have been developed and reviewed for the activity | | | |  | | | All boom sections other than the head section should be provided with a catwalk for the use of riggers and maintenance personnel - who shall wear a safety harness and connected lanyard when working away from the catwalk or machinery deck areas. Refer to [Work at Height MMR](https://mirvacau.sharepoint.com/:w:/r/sites/HealthSafetyandEnvironment/_layouts/15/Doc.aspx?sourcedoc=%7B3D796DAD-242C-4157-AD8F-8220DF30777B%7D&file=Work%20at%20Height%20MMR.docx&action=default&mobileredirect=true) [Work at Height MMR Reference Document](https://mirvacau.sharepoint.com/:w:/r/sites/HealthSafetyandEnvironment/_layouts/15/Doc.aspx?sourcedoc=%7B81120474-8111-4553-8FC5-8389121EED19%7D&file=Work%20at%20Height%20MMR%20Reference%20Document.docx&action=default&mobileredirect=true) | | | | | |  | | |
| Climbing rams have been tested and inspected | | | |  | | | | Crane tie design has been provided. | | | |  | | | Where there are multiple tower cranes operating in the same radius, the use of anti-collision systems. or slew limitation devices has been considered | | | | | |  | | |
| 3rd Party post climb inspection has been arranged by a suitably qualified engineer | | | |  | | | | Crane tie install inspection by a suitably qualified engineer has been arranged | | | |  | | |  | | | | | |  | | |
| Visual assistance devices have been arranged e.g... hook cam | | | |  | | | | Consideration has been given to secondary access points from structure to minimise operator climbing heights (these also require unauthorised access controls) | | | |  | | |  | | | | | |  | | |
| Secondary operational assistance devices have been arranged i.e. slew limitation or anti-collision systems where applicable | | | |  | | | | Consideration has been given to tower access lighting requirements and aviation obstruction lighting | | | |  | | |  | | | | | |  | | |
| For tower cranes set with booms exceeding 40 m in length, consideration is given to engineering solutions for safe access to tower sections being lifted. i.e. a hinged or pivoted mono-rail, or a counter balanced monorail.  Note: Where engineering solutions are not practicable and a dogman is required to travel with a new section - a JSEA/SMWS with control measures is to be developed involving those involved in the task. Consider when climbing tower cranes that the flipper is secured and engaged and luff drum visible | | | |  | | | |  | | | |  | | |  | | | | | |  | | |
| Comments: | | | | | | | | | | | | | | | | | | | | | | | |
| **Part A – Activity planning verification. All documents required above have been provided, verified and approved. All items are marked Yes or N/A** | | | | | | | | | | | | | | | | | | | | | | | |
| Project Manager: | |  | | | | | | | | | Signature: | | |  | | | | | Date: | | | |  |
| Workplace Manager: | |  | | | | | | | | | Signature: | | |  | | | | | Date: | | | |  |
| Nominated Mirvac Representative: | |  | | | | | | | | | Signature: | | |  | | | | | Date: | | | |  |
| **Part B – Pre- activity checks** | | | | | | | | | | | | | | | | | | | | | | | |
| HOLD POINT – Tower Crane Erection, Climbing, Dismantling Activity Checks are to be completed prior to authorisation for works to proceed. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | **Yes No**  **N/A** | | | |  | | | | **Yes No**  **N/A** | | |  | | | | | | **Yes No**  **N/A** | | |
| Weather conditions have been assessed and are suitable for the activity. Agreed with Crane Coordinator and Workplace Manager. Wind speed meters are provided | | | |  | | | | Traffic Management is in place. | | | |  | | | Exclusion zone is established, signed appropriately as per activity layout plan | | | | | |  | | |
| Prestart meeting held with work crew. Attended by Nominated Mirvac Representative, HSE Officer/Coordinator and Workplace Manager | | | |  | | | | The work crew have been briefed and agree with the JSEA/SWMS | | | |  | | | The work crew have been briefed on the emergency procedures and all emergency responders are on site and available. Designated first aider available | | | | | |  | | |
| The work crew have been briefed on the crane lifting plan | | | |  | | | | Is the Lift Plan, SWMS and associated procedures available to the work crew at the activity zone? | | | |  | | | All equipment has been checked (lift gear, harnesses, rescue equipment, communications, tag lines etc.) | | | | | |  | | |
| All mobile cranes have been inspected by the operator and verified through log book | | | |  | | | | Electrical handover has been completed (lock/ tag fitted to crane DB/ supply) | | | |  | | | Access/ edge protection for trucks is in place | | | | | |  | | |
| All operatives involved in activity have been Mirvac and project inducted, HRWL/Competencies obtained on file | | | |  | | | | The work crew have been briefed on operational interface (with other plant) processes | | | |  | | |  | | | | | |  | | |
| Comments: | | | | | | | | | | | | | | | | | | | | | | | |
| **Part B – Activity planning checks have been completed and all requirements are implemented and effective. All items are marked Yes or N/A** | | | | | | | | | | | | | | | | | | | | | | | |
| Workplace Manager: | |  | | | | | | | | | Signature: | | |  | | | | | Date: | | | |  |
| Nominated Mirvac Representative: | |  | | | | | | | | | Signature: | | |  | | | | | Date: | | | |  |
| HSE Officer / Co-ordinator: | |  | | | | | | | | | Signature: | | |  | | | | | Date: | | | |  |
| **Authority to Proceed** | | | | | | | | | | | | | | | | | | | | | | | |
| Project Manager: | |  | | | | | | | | | Signature: | | |  | | | | | Date: | | | |  |
| **Part C – Post – activity documentation.** | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | **Yes No**  **N/A** | | |  | | | | **Yes No**  **N/A** | | |  | | | | | | | **Yes No**  **N/A** | |
| ITP / Commissioning documents have been received for erection or climbing activities and check of bolt torque and crane hoarding compliance has occurred | | | | | |  | | 3rd Party Crane Safe Report has been received. 3rd Party inspection report for climbing activities | | | |  | | | Crane has been inspected by Mirvac to verify all required equipment, security measures, secondary controls/ devices are fitted and operable | | | | | | |  | |
| Crane Crew Meeting No 1 completed. Includes Crane Crew Operational SWMS and Procedure induction. Inducted into SP HSE Management Plan. Mirvac requirements have been communicated | | | | | |  | | Operator Familiarisation documents completed and received | | | |  | | | Certification includes any attachments such as signs, hoardings, hook cams etc. | | | | | | |  | |
| To[w](https://mirvacau.sharepoint.com/:w:/s/HealthSafetyandEnvironment/EY6j0C5eGiVGjidybt2Rb5QB6sWooNCQEyxaP3oxJeFGRA?e=EJN8xc)er Crane [Post](https://mirvacau.sharepoint.com/:w:/r/sites/HealthSafetyandEnvironment/_layouts/15/Doc.aspx?sourcedoc=%7B2ED0A38E-1A5E-4625-8E27-726EDD916F94%7D&file=Tower%20Crane%20Post%20Erection%20Inspection%20ITP.docx&action=default&mobileredirect=true) Erection Inspection ITP completed by Third Party Engineer | | | | | |  | |  | | | |  | | |  | | | | | | |  | |
| **Activity completion - All documents required above have been provided, verified and approved. All items are marked Yes or N/A** | | | | | | | | | | | | | | | | | | | | | | | |
| Project Manager: | |  | | | | | | | | Signature: | |  | | | | Date: | | | |  | | | |