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| --- | --- |
|  | Questions are followed by answer fields. Use the ‘Tab’ key to navigate through. Replace Y/N or Yes/No fields with your answer. |
| Simple/basic lift plan technical detail |
| This is a controlled document; please ensure you complete the information requested. Do not attempt to alter formatting, amend text or headings in any section of the document.Guidance on Completing the Lift Plan:1. Complete all boxes in every section of the lift plan. Where information requested does not apply to the lift being planned, state N/A (Not Applicable).
2. Ensure FRANCES BAY MARINE FACILITIES: CRANE OPERATIONS AND LIFTING PROCEDURE has been read and followed.
3. When completing the plan, if in doubt, seek further guidance from the Lifting Focal Point and / or Lifting Technical Authority.

Note: Incorrect or incomplete information will result in the plan being rejected and delays in the authorisation and endorsement process. |
| Lift plan details |
| Vessel/company name |  |
| Crane vendor |  |
| Description of the lifting operation: |
|  |
| Wharf name |  | Date of lift |  |
| **Location on wharf** |  |
| Risk Assessment - attached for review | Yes / No | Photos / Drawing / Sketch attached | Yes / No |
| **Category of lift:** |  | Will this plan cover multiple lifts | Yes / No |
| **Lift plan author (crane operator)** | **Authorisation: Company / Vessel requiring lift** |
| Competent person details | Lifting focal point details |
| Name: |  | Name: |  |
| Signature: |  | Signature: |  |
| Date: |  | Date: |  |
| To be completed by a ‘competent person’ |
| **Description of load**If multiple lifts, use data from weight of load creating highest % of capacity (ie: worst-case load) |
| Load weight: [e.g. kg] |  | Load dimensions: L x W x H |  |
| Rigging weight:] | HB = | kg | Number of rigging / lift points on the load: |  |
| RS = | kg |
| FJ = | kg |
| RW = | kg |
| Total Weight to be Lifted:  | kg | Offset centre of gravity | Yes / No |
|  |  |  |  |
| Weights and dimensions of additional lifts |
| Load weight | kg | Load dimensions (L x W x H) |  |
| Load weight | kg | Load dimensions (L x W x H) |  |
| Load weight | kg | Load dimensions (L x W x H) |  |
| Load weight | kg | Load dimensions (L x W x H) |  |
| Crane – mobile, portal, crawler, truck-mounted, HIAB, etc |
| Crane manufacturer (e.g. model, capacity. etc.) |  |
| Identification number (certificate, registration etc.) |  |
| Maximum required operating radius |  |
| Crane capacity @ maximum operating radius | **kg** |
| Hook block weight | **kg** |
| Stowed fly-jib weight @ maximum required radius | **kg** |
| Boom tip sheave (rooster sheave) weight | **kg** |
| Capacity / Radius charts attached (if applicable):  | Yes / No / NA |
| Crane percentage utilization: (TW ÷ Crane capacity at maximum radius) x 100 | **%** |
| Ground condition |
| Gross weight being applied? |  | Underground services / voids identified:  | Yes / N/A |
| Load spreading:actual size of load mats to be used: (e.g. 2.5m x 2.5m etc.) | No of mats | Mats area | Total area | Any environmental effect, e.g. waterlog (high water table): |  |
|  | m2 | m2 |
| Applied bearing pressure | kg/m2 | Allowable ground bearing pressure: | kg/m2 |
| Communication method |
| Hand signals: |  | Radio |  | Verbal |  | **Combination** |  |
| Notes: |
|  |
| Manpower requirements (Number of personnel required to conduct the lifting operation) |
| Supervisor (crane vendor) |  | Crane operator(s) |  | Dogman |  | Rigger(s)/Tagline holders(s) |  |
| Additional personnel required? (vendors, laborer/helper etc.)  | Yes / No | Total numbers |  |
| Drawings, sketches, technical drawing |
|  |
| **On site check list before lifting** |
| Pickup, route to be travelled, laydown |
| Load pickup location? |  | Load laydown location? |  |
| Load path identified as clear of obstructions? | Yes / No |
| If no, list all obstructions in the load path: |
|  |
| Will the load be travelled over or in close proximity of live plant, pipework or machinery? | Yes / No | If “Yes” has this been addressed in the Risk Assessment? | Yes / N/A |
| Has a “contingency plan” been generated and / or communicated? | Yes / N/A |
| Has laydown location been clarified as suitable to accept a load of this size and shape?  | Yes / No |
| Has the capacity of the laydown location been assessed as suitable to accept a load of this weight?  | Yes / No |
| Is there a DLPE approved Traffic Management Plan for this activity? | Yes / No |
| **Simultaneous operations** |
| Have simultaneous operations been identified adjacent to lift area?  | Yes / No / N/A |
| How have these been communicated / controlled? |
|  |
| Have simultaneous operations been identified adjacent to lift area?  | Yes / No / N/A |
| How have these been communicated / controlled? |
|  |
| **On site checks before lifting (to be completed by crane vendor or competent person)** |
| Do all personnel involved in the lift hold the relevant high risk licence?  | Yes / No |
| Have all required toolbox conversation(s) been completed for this task? | Yes / No |
| Have the crane daily checklist been completed? (if applicable):  | Yes / No / N/A |
| Have pre-use inspections of all lifting equipment been conducted?  | Yes / No |
| Have you rigged the task as per this plan’s sketch and materials list? | Yes / No |
| Has the load been checked for loose or dropped objects and is free to be lifted? (e.g. sea fastening released, hold down bolts / lashings removed, not jammed etc.) | Yes / No |
| Is the wind speed at or below the site and / or equipment requirement? | Yes / No |
| Will the task you are about to conduct be affected by simultaneous operations? | Yes / No |
| Working at height, PPE, rescue plan in place:  | Yes / No |
| If tag lines are required, are all team members aware or their correct use? | Yes / No |
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