|  |  |  |
| --- | --- | --- |
| **Department:** | **City of Nanaimo**  |  |
| **Subject:** | **Crane Unit 413 Training Checklist** |

**(Complete this form with your supervisor and return to Human Resources)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employee Name:** |   |  | **Department:** |  |
| **Trainer:** |  |  | **Worksite:** |  |

*Tick the boxes as each topic is covered.*

|  |
| --- |
| **Pre-Set Up Checklist:** |
| * Worker has read and fully understands Safework procedure
 |
| * Worker has all the appropriate tickets to operate a crane truck
 |
| * Worker checks to see that the crane and truck have all the appropriate certifications and are up-to-date
 |
| * Worker has on appropriate PPE
 |
| **Procedure Checklist:** |
| * Worker performs correct pre-trip on truck
 |
| * Worker performs correct pre-trip on crane
 |
| * Worker parks truck appropriately to work
 |
| * Worker sets up safe work zone
 |
| * Worker pulls out stabilizers and lowers onto pads
 |
| * Worker checks for obstructions in work zone
 |
| * Worker demonstrates control of crane functions during a lift
 |
| * Worker demonstrates securing of loads on truck
 |
| * Worker follows all crane safety procedures
 |
| ***Trainer Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |
| **Training Complete (YES)/(NO) if no explain:**  |

I fully understand what has been presented to me, and give my personal commitment to actively participate and comply with all relevant regulations, policies, procedures, and instructions while I am onsite or representing the company.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Worker Signature:** |  |  | **Date:** |  |
| **Trainer****Signature:** |  |  | **Date:** |  |

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| **Revised:**  | **Approved by: John Elliot**  |