ORNL HOISTING AND RIGGING PROGRAM CRITICAL LIFT PLAN

The following applies on all critical lifts:		
Requires review and approval by the Hoisting and	Rigging Review Team and Le	evel 2 Managers.
Only trained and qualified personnel will be used w	hen making critical lifts.	
 A pre-lift meeting will be conducted involving all particular to the second s	rticipants to review the appro	ved lift plan and resolve any questions.
Presented by:	Date:	Phone:
1. Item(s) to be lifted:		
Scheduled lift date:	Location of lift:	
Describe lift, including weight, key dimensions and c appropriate to the complexity of the lift. (Add attachn	enter of gravity; develop and nents as necessary.)	attach rigging sketches in detail
Is a trial lift required? Yes No		
Does the lift consist of a hazardous, radioactive, or o	contaminated material? Y	es No
If Yes, identify:		
2. Procedures/References:		
DOE-STD-1090-2007, "DOE Hoisting and Rigging T	echnical Standard"	
OSHA 29 CFR 1910.178, .179, .180, .184		
ORNL Procedure(s): SBMS "Hoisting and Rigging" a	and "Work Control"	
Other:		
3 Hoisting equipment:	Type:	
Manufacturer:	Model [.]	
Capacity:	Serial:	
Date of latest annual inspection:	Latest calibration date	of instruments:
4 Rigging and below the book bardware: *		
Note: Prior to use, hardware must be labeled with th rated capacity.	e manufacturer's name, lifting	g device, weight, serial number, and
Type of slings:	Rated capacity:	Weight:
Shackles:		
Lifting rings/eyebolts:		
Riggings hooks: Load block/jib:		
Spreader bars/Below the hook lifting devices	Rated capacity:	Weight:
Total weight (Rigging equipment, below the hook ha Weight load to be lifted:	rdware, & crane attachments Total weight:):
Equivalent of greater ngging may be substitute	u by Onive professional rig	9613.

5. Equipment and lift relationship:

- A. Maximum operating radius:
- B. Planned operating radius:

C. Allowable load at maximum lift radius anticipated (from load chart):

- D. Ratio of lift to allowable load:
- E. Clearance between point sheaves and load:

Weight: Weight:

- F. Clearance to surrounding facilities/utilities:
- G. Clear path for load movement:

6. Stability of ground area:

- A. Soil bearing capacity has been evaluated to be adequate:
- B. Evaluation Method Visual Other:
- C. Mats required Size & number:
- D. Reviewed Underground Construction location:

7. Weight of item obtained by:

A. Certified weight scale:

B. Calculated independently by more than	1. Source:
one source:	2. Source:

C. If lift is an existing item (being removed or demolished), the weight must be recalculated, taking into account all modifications, including internal, as well as an allowance for scale, sediment, sludge, and insulation. Calculation work sheets SHALL be included in the LIFT PLAN and have a Professional Engineer stamp or be signed off by a QUALIFIED PERSON. (When weights are calculated, a 10% tolerance margin shall be added. This value may be increased at the discretion of the Hoisting and Rigging Team.)

D. Shippings manifests weight: Manufacturer data weight:

8. Task Specific Job Hazard Evaluation Completed: Yes (Required) Attach copy

9. Safety Considerations:

Communication utilized	during lift (i.e.,	hand signals,	radio):
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• Tag lines to be used: Yes No

10. Special instructions: Yes (list below) No

11. Approvals:

Hoisting and Rigging Teamsignatures and date	
1.	
2.	
3.	

Level 2 Manager:

Date:

4. 5. 6.

Pre-lift inspection to be completed before beginning the lift:

- Total weight of lift including rigging and below the hook hardware:
- Pre-use inspection of hoisting equipment (documented):
- Pre-use inspection of rigging and below the hook hardware:
- Dimensions, center of gravity, and arrangements in accordance with attached rigging sketches:

(COG will be marked on load and a drawing included showing how it was determined.)

- Footprint area for crane setup has been reviewed for underground hazard:
- Mobile crane set up with outriggers fully extended, pads on solid footing, tires clear of ground and crane level:
- Trial lift complete (when specified in Section 1):

Comments:

Person-In-Charge:	Initials:	Badge:	Date:

*PIC must be present during entire critical lift and be qualified to resolve any questions or problems that may arise during the lifting operation.

The following hoisting and lifting personnel (HLP) have attended the pre-lift meeting, reviewed the approved lift plan, and understand the procedure and equipment to be used:

HLP signatures: (Attach additional signature sheet if necessary)

2. 3.
3. 8
4. 9
5. 10

Person-In-Charge Signature:

Date: