

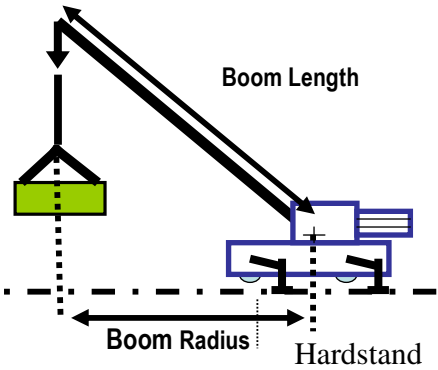
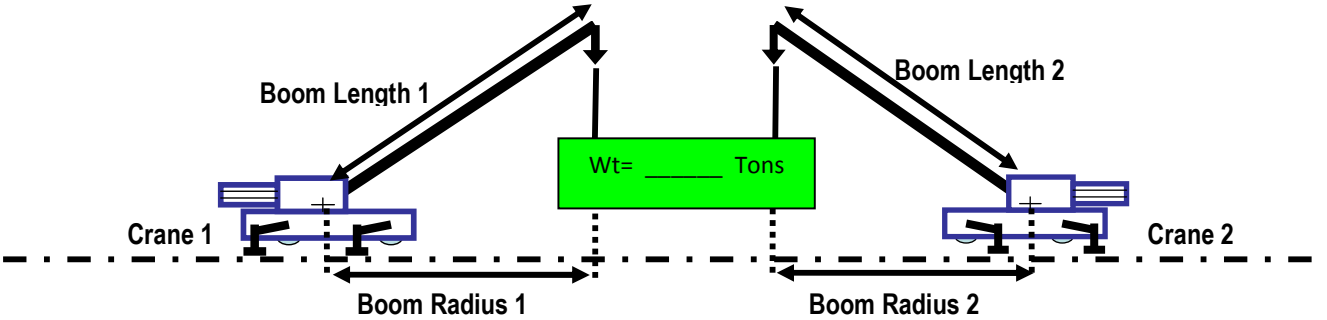
NOTIFICATION OF LIFTING OPERATIONS (NON-VESSEL)

Part 1-General Information -To be filled up by the Applicant (Company Representative)				
Description of work / Type of Cargo				
Operation Location		Max. Dimension of Cargo	Heaviest Cargo Wt.	
Start Date / Time			End Date /Time	
Communication Mode for Lifting Operations <input type="checkbox"/> By Radio <input type="checkbox"/> By Hand Signal <input type="checkbox"/> By Whistle <input type="checkbox"/> By Other Mode (Please Specify: _____)				
Part 2-Declaration -To be filled up by the Applicant (Company Representative)				
I, <u>The Appointed Lifting Supervisor</u> , hereby declared that the below documents are developed, available on site and shall be complied with during the entire operation.				
No	Document	Yes	No	Remark
1.	Notification of Lifting Operations (Non-Vessel)			
2.	Risk Assessment (RA) based on the description of work with no "High Risk" activities.			
3.	Working At Heights (WAH) Permit (Only applicable for WAH activity more than 3 metres)			
4.	Certificates of Lifting Gear / Appliances / Machine used (For Site Verification only)			
5.	Certificates of personnel involved (For Site Verification only)			
6.	Load Chart of the Mobile Cranes used (For Site Verification only)			
Lifting Supervisor				
I, <u>The Appointed Lifting Supervisor</u> , had prepared and evaluated the Lifting Plan and deemed safe to carry out the lifting operations as per plan. The lifting plan shall be communicated to all the relevant parties and lifting team for implementations.				
Name		Company / Stamp		
Signature		Date		
Appointment Of Lifting Commander / Supervisor				
I, _____ (on behalf of company representative) hereby appoint the above competent lifting commander/supervisor to be in-charged of the above mentioned lifting operations.				
Name		Company / Stamp		
Signature		Date		
Receipt By Jurong Port Representative -To be filled by Jurong Port Representative				
No	Item	Yes	No	Remark
1.	Is the load/equipment imposed weight on the ground within the engineering design requirement?			
2.	Have all the documents required in Part 2 been submitted?			
Receipt by:	_____ (Name of Duty JP Rep)	_____ (Signature)	_____ (Date/Time)	

Disclaimer>> The above information is provided by the Applicant and/or its representatives. The responsibility for the correctness, accuracy and completeness of its contents is solely borne by the Applicant. JPPL is not responsible for and assumes no liability whatsoever for the correctness, accuracy and completeness of such information.

Effective Date: 1 July 2014

NOTIFICATION OF LIFTING OPERATIONS (NON-VESSEL)

Single Lift - Cranes safe operating zone and assessment		
Crane Maximum SWL in LM		
Intended Working Boom Length		
Intended Working Boom Radius		
Safe Lifting Capacity (SLC) <i>(Refer to load chat, ensure the declared SLC is accurate based on intended boom length / radius)</i>		
Heaviest Load with Lifting Gears (HL) <i>(including cargo, forklift & other equipment)</i>		
Safety Factor (Safety Factor Limit for single crane operation : ≥ 1.1)	= _____ (SLC) / _____ (HL) = _____	
Tandem Lift - Cranes safe operating zone and assessment		
	Crane 1	Crane 2
Crane Maximum SWL in LM		
Intended Working Boom Length		
Intended Working Boom Radius		
Safe Lifting Capacity (SLC) <i>(Refer to load chat, ensure the declared SLC is accurate based on intended boom length / radius)</i>		
Heaviest Load with Lifting Gears (HL) <i>(including cargo, forklift & other equipment)</i>		
Safety Factor (Safety Factor Limit for Tandem crane operation : ≥ 1.25 per crane)	= _____ (SLC) / _____ (HL) = _____	= _____ (SLC) / _____ (HL) = _____
		
<p>I, <u>the appointed lifting supervisor</u>, declare that all the above safety factor (S):</p> <p>Please tick (v) in the box</p> <p><input type="checkbox"/> Is / are within the Safety Factor limit</p> <p><input type="checkbox"/> Has / have exceeded the Safety Factor limit (NOT ALLOWED TO STARTED LIFTING OPERATION)</p>		

Disclaimer>> The above information is provided by the Applicant and/or its representatives. The responsibility for the correctness, accuracy and completeness of its contents is solely borne by the Applicant. JPPL is not responsible for and assumes no liability whatsoever for the correctness, accuracy and completeness of such information.

Effective Date: 1 July 2014

NOTIFICATION OF LIFTING OPERATIONS (NON-VESSEL)

Lifting Gear Configuration Drawing **(Please Clearly indicated the SWL of all the lifting gear used)**

Declaration of lifting Supervisor and Crane Operator

I, _____ being the appointed lifting supervisor of _____ hereby confirm
(Name/ NRIC No.) (Company)
 that the declared information is accurate and there is no overloading of cargo, I had briefed the crane operator and lifting team members on this declaration.

I have take-over the key of the lock for "Over-ride" switch from the below mentioned crane operator. I will safe keep the key of the crane during the entire lifting operation and will only return it to the crane operator upon completion of lifting operation.

My contact telephone no: _____ Company stamp: _____ Signature: _____

I, _____ being the appointed crane operator of _____ hereby confirm
(Name/ NRIC No.) (Company)
 that I have been briefed by the above appointed lifting supervisor on the said declaration and undertake to comply with it.

I have handed over the key of the "Over-ride" switch locking device from the above mentioned appointed lifting supervisor during the entire lifting operation.

Signature: _____

Change of Lifting Supervisor

I, taking-over lifting supervisor as list below have been briefed by handing over lifting supervisor as listed below and understood the prepared lifting plan and risk assessment.

Date	Time	Name / signature of handing over lifting supervisor	Name / signature of taking-over lifting supervisor

Disclaimer>> The above information is provided by the Applicant and/or its representatives. The responsibility for the correctness, accuracy and completeness of its contents is solely borne by the Applicant. JPPL is not responsible for and assumes no liability whatsoever for the correctness, accuracy and completeness of such information.

Effective Date: 1 July 2014

NOTIFICATION OF LIFTING OPERATIONS (NON-VESSEL)

Safety Checklist

We acknowledge and agree that this checklist is intended to guide us in operations and other activities at Jurong Port. This Checklist is not intended and should not be taken as excluding or limit our responsibility to operate and act safely at Jurong Port or our liability under the Workplace Health and Safety Act or otherwise at law.

We undertake to take all necessary steps to ensure safe operations and other activities at Jurong Port on the part of ourselves, employees, agents, contractors or principal regardless of whether such steps are referred to in this Checklist.

S/no	Item to be checked	Yes	No	N/A
1	Risk Assessment:			
	a) Has a Risk assessment been conducted for the intended operation?			
	b) Do you have a Safe Work Procedure, including Safe lifting procedures?			
	c) Has safety briefing been conducted for the workmen immediately before commencement of work?			
	d) Have you ensured that there is and will continue to be proper and adequate supervision of work at all times?			
2	Lifting Personnel:			
	a) Do all workers possess the relevant skills/training and valid training certificate(s)?			
	b) Have all workers given adequate instruction, information and supervision for them to perform work?			
	c) Are all workers equipped with and wearing proper and complete safety gear in safety helmets, safety footwear, proper working attires(Bermudas or short is not allowed), reflective vest, harness and safety goggles?			
3	Work Environment:			
	a) Is the area suitable to for lifting operation (e.g placing adequate steel plate)?			
	b) Is the crane swing path free from obstruction (e.g power lines, building /structure or equipment)?			
	c) Is the lighting level sufficient for the lifting operations to be carried out safely?			
	d) Is the operation area barricaded to prevent unauthorized access?			
	e) Has the hazards of the work area and its surrounding been addressed and communicated to the workers involved in the operations?			
	f) Are the control measures for falling from height in placed?			
4	Machinery and Equipment:			
	a) Are correct/ appropriate lifting appliances, machines and gears used?			
	b) Have pre-operation checks for forklifts/ mobile cranes been conducted before commencement of work?			
	c) Are lifting appliances, machines and gears proper and in good working condition and with valid certificate(s)?			
	d) Are the crane outriggers fully extended and properly set up?			
5	Others:			
	a) Has any worker worked more than 12 consecutive hours before commencing this operation?			
	b) Have you checked to ensure that each worker is in the fit mental and physical state and condition to work?			

We confirm and declare that we have implemented the control measures described above and all other safety measures that we will continue such measures until the completion of operation or work including during the change of shifts.

We also confirm and declared that we have complied with the requirements of the Workplace Safety and Health Act (2006) and Jurong Port's General Rules and Regulations at all times.

I, _____ being the authorized representative of _____
(Name) (Company)

hereby confirm that I have made the necessary inspection before completing the said declaration.

Company stamp: _____

Signature: _____

Disclaimer>> The above information is provided by the Applicant and/or its representatives. The responsibility for the correctness, accuracy and completeness of its contents is solely borne by the Applicant. JPPL is not responsible for and assumes no liability whatsoever for the correctness, accuracy and completeness of such information.

Effective Date: 1 July 2014