

Notification Of Ship/Shore Crane Operations For Lighters / Wooden Craft

Notification By Requester		Location of Operation :				
Name of Company	:		Vessel Name :			
Name of Lifting Supervisor	:		<small>(Applicable for ship crane only)</small>			
Start Date / Time	:		Contact No:			
			Expiry Date / Time:			
<small>(Permit maximum validity period - 14 days)</small>						
<ul style="list-style-type: none"> - I hereby declare that I have successfully completed the lifting supervisor course approved by MOM and have at least one year of lifting experience. - I have evaluated the risk of the operations under my charge and confirm it safe for the operations. I undertake to comply with Jurong Port's rules & regulations, procedural compliance as stated in this notification, risk assessment and applicable WSH Act and regulations and all its related legislations. - Notification will be void if the any of the safety requirements are not complied with. This includes any change of operation mode or location of crane. - I have conducted Tool Box briefing based on the lifting operation, risk assessment and procedural compliance as stated in this notification to the qualified crane operator, rigger / signaller prior to the lifting operation. - I will ensure that the load/equipment imposed weight on the wharf deck meet the engineering design requirement. 						
Lifting Supervisor's Signature		:	Date / Time:			
Particular of crane :						
S/n	Crane model / capacity (ton)	LM Reg. of Crane	Expiry date	Name of Crane Operator	MOM Reg. No:	Expiry date

I shall ensure that the below mentioned items are valid and verified by me PRIOR to any lifting operation.

S/n	Checklist / Certification	Yes	No	Remarks
1	Training certificate / record of crane operator, lifting supervisor, rigger & signalman available?			
2	Crane's registration, insurance, LTA registration available?			
3	Valid certificate for lifting equipment and gear used available?			
4	Daily crane operation checklist completed?			
5	Risk Assessment for the intended activity available?			
6	Risk assessment briefing / tool box briefing record completed with attendance?			
7	Lifting plan assessment on crane and lifting gear setup.			
8	Is the gangway properly installed?			If applicable
9	Working At Heights (WAH) Permit (For WAH activity more than 3 metres) available?			If applicable

Received by Jurong Port Representative

The above checklists were submitted and verified by me at the time of inspection

Name of Jurong Port Representative	Signature	Date / Time

Effective Date: 1 July 2014

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To be filled by Requester

Requester to brief the hand-over lifting supervisor and mobile crane operator on this notification requirements :			
Date	Time	Name	Notify by:

Compliance Procedure: (The lifting supervisor shall comply with the following)

1. Ensure review date of the lifting operation Risk Assessment document has not expired and was duly signed off by an approved person.
2. Ensure Risk Assessment is communicated to personnel performing lifting operation and signed off in the 'Tool Box Briefing attendance'.
3. Vehicle movements shall be planned and coordinated to ensure safety of personnel within the crane operating / lifting zone.
4. Do not cause traffic congestion at the crane operating / lifting zone
5. Inform and ensure personnel stay clear of the crane operating / lifting zone.
6. Ensure the vehicle path is clear of obstruction and personnel.
7. No lifting of load above head of personnel.
8. Load shall not exceed the crane safe working load (stipulated in the crane load chart).
9. Crane safe operating radius shall be maintained to prevent boom crash.
10. Tag line shall be used for load control. Keep hands clear of pinch point.
11. Safe means of access shall be maintained and provided for personnel within the crane operating / lifting zone.
12. This Notification for operations shall **not exceed 14 days**. Lifting supervisor shall maintain the validity period under this notification.
13. Each notification is only restricted to a single ship / shore crane in operation.
14. Ensure that only qualified crane operator, rigger / signaler are allowed to perform lifting operation.
15. Ensure lifting equipment is certified with valid inspection date, in working condition, with no defect, suitable for use and load does not exceed safe working load.
16. Verify that daily inspection of ship / shore crane is carried out at the start of each shift by the crane operator.
17. Do not operate crane under low light or poor visibility conditions.
18. Where personnel is required to access to and from the vessel, gangway of sound structure with double railings and safety netting shall be securely installed at a safe location to prevent person from trip and fall.
19. Personal protective equipment such as safety helmet, safety shoes and luminous reflective vest are compulsory for works.
20. Comply with Workplace Safety & Health Act and Jurong Port's Rules and Regulations. If in doubt, 'ASK FOR ASSISTANCE' before starting to work.

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Daily Tool Box Briefing Attendance

1. I, lifting supervisor, before the lifting operation, have duly briefed the ship crew / lifting team / workmen on the 'compliance procedure', hazards and control measures with respect to the risk assessment for the intended lifting operations.
 2. I, lifting supervisor, hereby confirm that the declared information is accurate and there is no overloading of cargo.
 3. I, lifting supervisor, have taken 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.
 4. I, the under mentioned 'NAME', fully understand and will comply with the control measures for the lifting operations risk assessment as well as the 'compliance procedure' as stated in this notification.
 5. I, Mobile Crane Operator, have handed over the key of the "Over-ride" switch locking device to the above mentioned appointed lifting supervisor during the entire lifting operation.
- Item 3 & 5 are only applicable to mobile crane operation.

Name of Lifting Supervisor		Signature		Contact No	
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S/no	Name	Designation	NRIC / WP	Date:	Date:	Date:	Date:	Date:	Date:	Date:
				Sign	Sign	Sign	Sign	Sign	Sign	Sign

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Declaration of Equipment / Gears								
S/no	Description of lifting equipment	Certificate – LM / LG No:	Capacity / (Ton)	Safe working Load (SWL)	Date of Expiry	Conditions :		Remarks
						Good - ✓	Poor - x	

The above lifting equipment had been inspected by me and is found to be in safe and sound working conditions with valid inspection date. If the lifting equipment has any defects, it shall be immediately removed from the worksite. No servicing, repair and maintenance work for lifting equipment are allowed.

Name of Lifting Supervisor		Signature		Date & Time		Contact No	
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Indicate / sketch crane location in the layout:

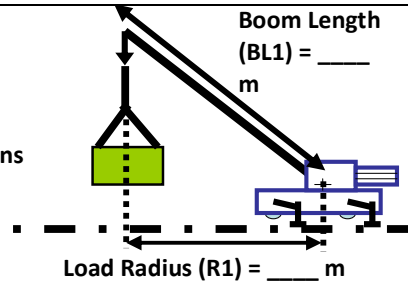
Crane Maximum SWL in LM = _____ Tons

Safe Lifting Capacity (SLC) at R1 & BL1
= _____ Tons

Heaviest Load with lifting gear (HL) = _____ Tons

Safety Factor = _____ (SLC) / _____ (HL)
= _____

(Safety Factor Limit ≥ 1.1)

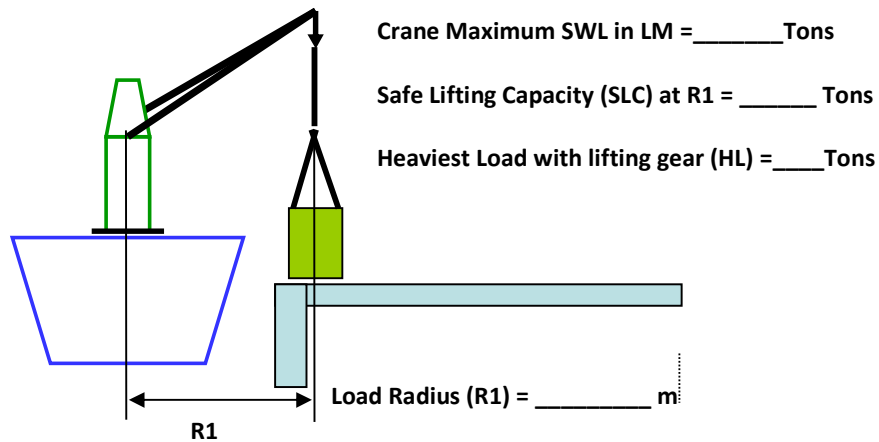


I, the appointed lifting supervisor, declare that all the above Safety Factor(s) :

Please \checkmark in the box

Is/are within the Safety Factor Limit of ≥ 1.1

Has/have exceeded the limit (NOT ALLOWED TO START LIFT OPERATION)



Lifting Gear Setting Up Configuration

Provide drawing for the lifting gear and detailed setup for the cargo to be lifted:
(Selection & set up of lifting Gears details)