

# Crane Safety Operation Checklist

## Crane Details

Crane Model/Type		Serial/ID Number	
Location		Date	
Operator Name		Supervisor Name	

## Pre-Operation Checklist

Item	Yes	No	Remarks
Daily inspection completed			
Controls functioning properly			
Warning devices operational			
Limits & safety devices checked			
Wire ropes and hooks in good condition			
Load chart visible and legible			

## Operation Checklist

Item	Yes	No	Remarks
Crane positioned on firm, level ground			
Area is clear of obstructions			
Stabilizers/outriggers fully extended			
Proper personal protective equipment used			
Lift load within crane's rated capacity			
Clear communication maintained			

## Post-Operation Checklist

Item	Yes	No	Remarks
Crane parked and secured			
Outriggers/stabilizers retracted			
Controls in off/neutral position			
All issues reported			

Operator Signature

Supervisor Signature

Date