ISSUANCE #:133

TECHNICAL POLICY AND PROCEDURE NOTICE #:18/88

TO: DISTRIBUTION (See Attached List)
FROM: Jacob Grill, P.E., Assistant Commissioner
DATE: September 29, 1988
SUBJECT: CERTIFICATION BY EXPERIENCED PERSON OF HAVING SUPERVISED JUMPING OF EXTERNAL OR INTERNAL CLIMBER CRANE (FORM #33).
This form is to be completed and sent or hand delivered to the Cranes and Derricks Division Forty Eight (48) hours before climbing or jumping a Tower Crane.

Crane C.D.# _____/C.N.# ______

Crane Location: ________________________________

External Climbing Crane: [ ]

Internal Climbing Crane: [ ]

I, ________________, representing the owner of the crane or contractor have been designated as the supervisor in charge of jumping the above crane. I will personally check that all horizontal bracing, collars, shoring, and wedges conforms to the drawings approved by the Cranes and Derricks Division.

I, ____________________, am a person having at least three (3) years of experience in construction or erection of Tower Cranes.

SUPERVISOR'S NAME (print) ________________________________

SUPERVISOR'S SIGNATURE: _______________________________________

ADDRESS: _______________________________________________________

TELEPHONE NUMBER: ___________________________________________

NAME OF OWNER OR CONTRACTOR (print) __________________________

SIGNATURE, OWNER OR CONTRACTOR: _____________________________

NAME OF COMPANY: _____________________________________________

ADDRESS: ______________________________________________________

TELEPHONE: ____________________________________________________