

CD8-AD Technical Report: On-Site Crane Pre-Operation Inspections

CN Number:_

| appl 1 R0 the I | icable, the CD8-AD and CNY §3319-01, and the | ot operate until it has pa d CD8-TR forms, have b condition that led to the lusion of the inspection the Department. | peen submitted to the De e failure is not corrected | epartment. If the crain by the end of the ins | ne or derrick fails a spection or test, su | in inspection o ch condition m | r test requ ust be rep | ired by corted to | |
|-----------------------|---|--|---|--|---|-----------------------------------|---------------------------|----------------------|--|
| 1 | Filing Status | | | | | | | | |
| | ☐ Initial Installation | Phase # | Position # | Jump | Amendment #_ | | Annual Re | enewal | |
| 2 | Location Informati | on (must match informa | ation provided on CD4 fo | orm) | | | | | |
| | House No(s). | Street Name | | | | | | | |
| | Borough | Block | Lot | BIN | Job Nu | mber | | | |
| 3 | Design Applicant I | nformation (must ma | tch information provided | on CD4 form) | | | | | |
| | Last Name | | First Name | | M.I. | | | | |
| | Business Name | | | P.E. I | License # | | | | |
| | Address | | | | | | | | |
| | City | | State | | Zip | | | | |
| | Phone | | Fax | | Email | | | | |
| 4 | Crane or Derrick Ir | nformation | | | | | | | |
| | Manufacturer | | Model | | Amendme | nt required? | quired? Yes No | | |
| | CD Number | Serial Number | Expiration Date | Boom (ft.) | Mast (ft.) | Jib (ft.) | То | tal (ft.) | |
| | | | | | | | | | |
| 5 | Unassembled Insp | ection (see 1 RCNY § | S3319-01 (a)) | | | | | | |
| | Prior to assembly/disa | ssembly operation, the a | ssembly/disassembly di | | | | FAIL | N/A | |
| | performs visual inspection and verifies the items below have been completed in accordance with 1 RCNY §3319-01 Serial numbers and ID marks on components to be installed match those on Certificate of Operation and material | | | | | | | | |
| | testing reports No shipping damage t | o components shipped to | site | | | | | | |
| | 5 | s free of deformations or | | | | | | | |
| | Ropes and pendants of | conform to requirements | of crane notice plans and | d manufacturer's requ | uirements | | | | |
| 6 | Assembled Inspec | tion—Cranes and De | erricks except Towe | r Cranes See 1 RC | CNY §3319-01 (g)(8 | 3) | | | |
| | | lisassembly operation, the | | | visual inspection a | nd PASS | FAIL | N/A | |
| | verifies that the items below have been completed in accordance with 1 RCNY §3319-01 Mechanical components e.g. sheaves, winch packs, load cells are in working order and installed in accordance with manufacturer's requirements | | | | | | | | |
| | | mply with submitted cran | e notice plans and manu | ıfacturer's requiremer | nts | | | | |
| | Electrical components | —connections made in a | ccordance with manufac | cturer's requirements | | | | | |
| | | | | | | | | | |
| | Hydraulic components | -connections and hose | s are installed in accorda | ance with manufactur | er's requirements | | | | |
| | Structural components | s (including attachments) connection elements are | —No deformation or dan | nage, installed with co | onnections as requi | | | | |
| | Structural components by crane notice plans; with crane notice plans Bolts, pins, links, and | s (including attachments) connection elements are | —No deformation or dan e within tolerances of cra free from damage or def | nage, installed with connection ne manufacturer and | onnections as requi installed in accorda | ance | | | |
| | Structural components by crane notice plans; with crane notice plans Bolts, pins, links, and tolerances of the appn | s (including attachments) connection elements are s straps—are in place, are | —No deformation or dan e within tolerances of cra free from damage or def and the manufacturer | nage, installed with cone manufacturer and formation, and meet t | onnections as requi installed in accorda | ance | | | |

| Buildi | ngs On-Site Crane Pre-Operation inspections | | р | age 2 of 3 |
|--------|---|-------------|---------|------------|
| | CN Number: | | | |
| 7 | Assembled Inspection—Tower Cranes Other Than Self-Erecting Tower Cranes See 1 RCNY §3319 | -01 (g) | | |
| | Following assembly/disassembly operation, the licensed Rigger performs visual inspection and verifies that the items below have been completed in accordance with 1 RCNY §3319-01 | PASS | FAIL | N/A |
| | Mechanical components e.g. sheaves, winch packs, load cells are in working order and installed in accordance with manufacturer's requirements | | | |
| | Lifting attachments are installed in accordance with Crane Notice and manufacturer's requirements | | | |
| | Electrical components — connections made in accordance with manufacturer's requirements | | | |
| | Hydraulic components — connections and hoses are installed in accordance with manufacturer's requirements | | | |
| | Structural components — No deformation or damage, installed with connections as required by Crane Notice plans; connection elements are within tolerances of crane manufacturer and installed in accordance with Crane Notice plans | | | |
| | Pins, bolts, straps and links are in place, are free from damage or deformation, and meet the requirements and tolerances of the approved crane notice plans and the manufacturer | | | |
| | Crane is free of loose items or objects that may become dislodged | | | |
| | Collar and Tie-ins — DOES NOT APPLY TO CONNECTIONS BELOW THE FIRST MAST SECTION (see CD8 and/or CD8-TR) | | | |
| | All collars and inner bracings installed for each tie-in point | | | |
| | All safety tie-backs and ropes connecting tie-in collar to tower are installed, meet manufacturer or approved Crane Notice plan requirements, and are free of damage or deformation | | | |
| • | T | | | |
| 8 | Tower Crane Sections — Other than Self-Erecting Tower Crane Sections | | | |
| | Sections torqued to ft-lb in accordance with manufacturer's recommended bolt torque | PASS | FAIL | N/A |
| | value of ft. lb. (Licensed Rigger to fill in number of sections and torque values) | | | |
| | Plumbness reported in SECTION 11 is in accordance with values and tolerances shown on approved crane notice plans. | | | |
| | | | | |
| 9 | Assembled Inspection — Self-Erecting Tower Cranes (see 1 RCNY §3319-01 (g)) | | | |
| | Following completion of work required for the phase specified in Box 1, the assembly/disassembly director performs visual inspection and verifies that the items below have been completed in accordance with 1 RCNY §3319-01. | PASS | FAIL | N/A |
| | Pins and interlocks have been placed and set in accordance with manufacturer's specifications. | | | |
| | Electrical components — connections made in accordance with manufacturer's requirements | | | |
| | Hydraulic components — connections and hoses are installed in accordance with manufacturer's requirements | | | |
| | Structural components — connections are made as shown on Crane Notice documents and are free of deformation or damage | | | |
| | Mechanical components are in working order and installed in accordance with manufacturer's requirements | | | |
| 1 | | | | • |
| 10 | Pre-Operational Test (Load Test) (see 1 RCNY §3319-01 (g)(8)(i)(D)) | | | |
| | The designated witness shall witness and verify that the assembled crane or derrick has passed preoperational tests in accordance with the approved pre-operational test procedures submitted with the Crane or Derrick Notice application. | PASS | FAIL | N/A |
| | Pre-operational test performed and verified by witness meeting requirements of §3319-01(g)(8)(i)(D) | L | | |
| | If the crane or derrick has initially failed an inspection or test, note the condition here, with the corrective action taken to resol | ve the defi | ciency. | |
| | | | | |
| | | | | |

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STATEMENTS

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a City employee, or for a City employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

| Last Name | First Name | M.I. | |
|--|--|--|--------------------------------------|
| Business Name | | | |
| Address | | | |
| City | State | Zip | |
| Phone | Fax | Email | |
| This is to certify that I have | measured the out-of-plumbness for | tower/mast sections o | f the above crane with a total heigh |
| | inches. The lean in the following directions | | _ |
| (direction); | inches(direction). | | |
| Date of Survey | Signature | | Date |
| Piggor or Assembly/D | isassembly Director's Statement (see 1 | 1 PCNV \$2210 01 (a)) | |
| | <u></u> | | |
| ☐ Master Rigger License | # | license # | Assembly/Disassembly Dire |
| Last Name | First Name | M.I. | |
| Dunings Name | | | |
| Business Name | | | |
| Address | | | |
| | State | Zip | |
| Address City Phone | Fax | Email | |
| Address City Phone As the Assembly/Disassenindicated on this report in S | | Email installation, I hereby state that ON 8, SECTION 9, and SECTI | · · · |
| Address City Phone As the Assembly/Disassen indicated on this report in Statement of the research of the rese | Fax analy Director/Licensed Rigger supervising this SECTION 5, SECTION 6, SECTION 7, SECTI | Email installation, I hereby state that ON 8, SECTION 9, and SECTI | ON 10, and found that all items |
| Address City Phone As the Assembly/Disassen indicated on this report in Statement of the research of the rese | Fax analy Director/Licensed Rigger supervising this SECTION 5, SECTION 6, SECTION 7, SECTIon 1, SECTION 2, SECTION 2, SECTION 3, SECTION 2, SE | Email installation, I hereby state that ON 8, SECTION 9, and SECTI | ON 10, and found that all items |
| Address City Phone As the Assembly/Disassen indicated on this report in Signspected conform to the resignature | Fax analy Director/Licensed Rigger supervising this SECTION 5, SECTION 6, SECTION 7, SECTIon 1, SECTION 2, SECTION 2, SECTION 3, SECTION 2, SE | Email installation, I hereby state that ON 8, SECTION 9, and SECTI e. Date | ON 10, and found that all items |
| Address City Phone As the Assembly/Disassen ndicated on this report in Senspected conform to the resignature | Fax analy Director/Licensed Rigger supervising this SECTION 5, SECTION 6, SECTION 7, SECTIon 1, SECTIon 2, SECTION 2, SECTION 3319-01 as applicable sequirements of 1 RCNY 3319-01 as applicable sequirements. | Email installation, I hereby state that ON 8, SECTION 9, and SECTI e. Date | ON 10, and found that all items |
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| Address City Phone As the Assembly/Disassen ndicated on this report in Sample ted conform to the residual signature Pre-Operational Test (Last Name | Fax The properties of the pro | Email installation, I hereby state that ON 8, SECTION 9, and SECTI Date Date (1) (g)(8)(i)(D)) M.I. | ON 10, and found that all items |
| Address City Phone As the Assembly/Disassen indicated on this report in Sinspected conform to the resistance Pre-Operational Test (Last Name Business Name | Fax The properties of the pro | Email installation, I hereby state that ON 8, SECTION 9, and SECTI Date Date (1) (g)(8)(i)(D)) M.I. | ON 10, and found that all items |