

**OTHER FORMS NEEDED: ACORD 125**

**CRANE RENTAL SUPPLEMENTAL APPLICATION**

To be used with Commercial General Liability Application (Acord 125)

**GENERAL LIABILITY**

1. Name of Applicant: \_\_\_\_\_
2. List types of jobs or services applicant will be involved in: \_\_\_\_\_  
\_\_\_\_\_
3. List cranes including type, load capacity, boom length and use. \_\_\_\_\_  
\_\_\_\_\_
4. List safety devices on cranes (sensors, insulators, etc.) \_\_\_\_\_  
\_\_\_\_\_
5. Does applicant always use a signed work order/contract &/or rental agreement? .....  Yes  No  
If yes, attach copy. If no, account may not be acceptable.
6. Are cranes rented or leased with or without an operator? .....  Yes  No
7. Describe the applicant's on the job-training program. \_\_\_\_\_  
\_\_\_\_\_
8. Describe work site safety procedures during crane operation. \_\_\_\_\_  
\_\_\_\_\_
9. What are the maximum and average values of crane loads? \_\_\_\_\_  
\_\_\_\_\_
10. Describe type of locations worked with percentage of total in each. \_\_\_\_\_  
\_\_\_\_\_
11. What arrangements are made for backup cranes in case of problems? \_\_\_\_\_  
\_\_\_\_\_
12. Have any cranes been altered? .....  Yes  No  
If yes, have they been re-certified? .....  Yes  No
13. Does applicant require other contractors to enforce onsite safety rules? .....  Yes  No
14. Who is responsible for determining lift/load calculations? \_\_\_\_\_  
\_\_\_\_\_
15. Do truck-mounted cranes have proper front counterweights in place? .....  Yes  No
16. Describe procedures used for taking lift-site surveys? \_\_\_\_\_  
\_\_\_\_\_
17. Describe procedures used for pre-lift inspections? \_\_\_\_\_  
\_\_\_\_\_
18. Does applicant prepare a pre-lift plan involving operator and signalmen? .....  Yes  No

19. Describe safety procedures used when lifting around utility lines. \_\_\_\_\_  
 \_\_\_\_\_
20. How does applicant prevent unauthorized use of cranes? \_\_\_\_\_  
 \_\_\_\_\_
21. Are all cranes equipped with "deadman controls"? .....  Yes  No
22. Is applicant involved with any design or consultation work? .....  Yes  No  
 Explain. \_\_\_\_\_  
 \_\_\_\_\_
23. Does applicant assemble or install overhead industrial cranes? .....  Yes  No

**PREMISES**

24. Does applicant operate a work/storage building or yard? .....  Yes  No
25. Are fire extinguishers present? .....  Yes  No  
 Are they maintained? .....  Yes  No  
 Are they visible? .....  Yes  No
26. Are work areas kept free of grease, oil and flammable rubbish? .....  Yes  No
27. Is crane repair done on premises? .....  Yes  No  
 Describe facilities. \_\_\_\_\_
28. Describe safety requirements regarding fuel handling. \_\_\_\_\_  
 \_\_\_\_\_
29. Do drivers refuel their own vehicles? .....  Yes  No
30. Do concrete posts protect fuel pumps and tanks? .....  Yes  No

**AUTOMOBILE**

31. Describe safety measures taken during the transportation of crane. \_\_\_\_\_  
 \_\_\_\_\_
32. Explain how travel routes are determined for transporting cranes. \_\_\_\_\_  
 \_\_\_\_\_
33. Describe how cranes are secured while being transported. \_\_\_\_\_  
 \_\_\_\_\_
34. Does applicant have specific qualifications for heavy unit drivers? .....  Yes  No

**INLAND MARINE**

35. Describe how applicant protects materials and equipment at job sites. \_\_\_\_\_  
 \_\_\_\_\_
36. Are crane ignition systems tamper-proof? .....  Yes  No
37. When possible, are operators assigned to the same crane? .....  Yes  No

38. Describe communication procedures between operator and signalman. \_\_\_\_\_  
 \_\_\_\_\_
39. Are cranes equipped with wind sensing alarms? .....  Yes  No  
 What is the setting? \_\_\_\_\_
40. Are crane engines always shut off be refueling? .....  Yes  No

**WORKERS COMPENSATION**

41. List requirements of operators regarding health, experience, etc. \_\_\_\_\_  
 \_\_\_\_\_
42. Describe operator-training program. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
43. Are accidents and incidents reviewed be management and operators? .....  Yes  No
44. Does applicant use or allow the use of personnel buckets on site? .....  Yes  No
45. Are employees alerted and kept clean of lift area during operation? .....  Yes  No
46. Are employees furnished and required to use protective equipment? .....  Yes  No

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Date