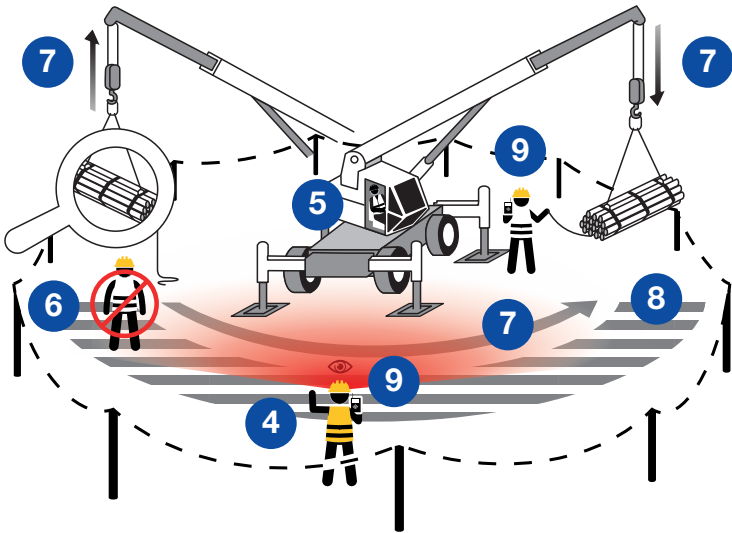


# LIFTING OPERATIONS

- 1 Safety Green Light
- 2
- 3



**7 fatalities**  
related to lifting operations  
occurred in the Group  
in the last 10 years.

# LIFTING OPERATIONS



Location \_\_\_\_\_ Date \_\_\_\_\_

Observed company \_\_\_\_\_ Permit N° \_\_\_\_\_

YES NO N/A

## POINTS TO BE CHECKED

**1** Has the "Safety Green Light" been carried out?

**2** Is an approved lifting plan available?

**3** Have the following been checked: color coding and conditions of the lifting gears, weight of load less than the Safe Working Load, communication means defined and tested, ground/deck conditions checked?

**4** Has the banksman been appointed and can be easily identified?

**5** Does the lifting equipment operator hold a training certificate and a document authorizing him/her to operate the lifting equipment?

**6** Has a restricted zone been physically established and nobody is standing under or close to the suspended load?

**7** Is the lifting operation being executed according to the lifting plan? (e.g., slings, departure area, arrival area, overflowed area)

**8** Is no pressurized equipment located under or close to the suspended load, except in specific cases covered in the risk analysis?

**9** Is the moving load controlled while being lifted?

Compliance rate (Nb YES/applicable points): \_\_\_\_\_ / \_\_\_\_\_ ( \_\_\_\_\_ %)

Comments \_\_\_\_\_

Name \_\_\_\_\_ Company \_\_\_\_\_

Signature \_\_\_\_\_