

STATE OF CALIFORNIA—OFFICE OF ADMINISTRATIVE LAW  
**NOTICE PUBLICATION/REGULATIONS SUBMISSION**

# FILE PRINT

(See instructions on reverse)

For use by Secretary of State only

TD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER	REGULATORY ACTION NUMBER	EMERGENCY NUMBER
	Z-2018-0112-01	2018-0424-06	FP

**ENDORSED - FILED**  
 in the office of the Secretary of State  
 of the State of California

MAY 30 2018  
 1:41 PM

For use by Office of Administrative Law (OAL) only	
RECEIVED DATE <b>JAN 12 '18</b>	PUBLICATION DATE <b>JAN 26 '18</b>
2018 APR 24 P 4:44 OFFICE OF ADMINISTRATIVE LAW	
Office of Administrative Law	Office of Administrative Law
NOTICE	REGULATIONS

AGENCY WITH RULEMAKING AUTHORITY  
 Occupational Safety and Health Standards Board

AGENCY FILE NUMBER (if any)

**A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)**

1. SUBJECT OF NOTICE CSO 1618.1	TITLE(S) Title 8	FIRST SECTION AFFECTED Section 1618.1	2. REQUESTED PUBLICATION DATE January 26, 2018
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Marley Hart, Executive Officer	TELEPHONE NUMBER (916)-274-5721	FAX NUMBER (Optional) (916)-274-5743
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	ACTION ON PROPOSED NOTICE	NOTICE REGISTER NUMBER	PUBLICATION DATE

**B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)**

1a. SUBJECT OF REGULATION(S) Operator Qualification & Certification - Effective Dates	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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7. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)

SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT
	AMEND 1618.1
TITLE(S) 8	REPEAL

3. TYPE OF FILING

<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input checked="" type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input checked="" type="checkbox"/> Other (Specify) Exempt per Labor Code 142.3(a)(3)	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify)
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8. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify)		

7. CONTACT PERSON Marley Hart	TELEPHONE NUMBER 916.274.5721	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) mhart@dir.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Marley Hart</i>	DATE 4/19/18
TYPED NAME AND TITLE OF SIGNATORY Marley Hart, Executive Officer	

For use by Office of Administrative Law (OAL) only  
**AUTHORIZED FOR FILING AND PRINTING**  
 MAY 30 2018  
 Office of Administrative Law

**STANDARDS PRESENTATION  
TO  
CALIFORNIA OCCUPATIONAL SAFETY AND HEALTH STANDARDS BOARD**

Attachment No. 1

Page 1 of 1

PROPOSED STATE STANDARD,  
TITLE 8, DIVISION 1, CHAPTER 4

Subchapter 4. Construction Safety Orders  
Article 15. Cranes and Derricks in Construction

Modify Section 1618.1 as follows:

§1618.1. Operator Qualification and Certification.

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(e) Effective Dates and Phase-in.

(1) Mobile and tower crane operator qualifications and certification shall be in accordance with the provisions of General Industry Safety Orders, Section 5006.1 effective June 1, 2005, until November 10, ~~2017~~ 2018.

(2) The provisions of this section are applicable July 7, 2011, except for subsections (a)(2) and (d) which are applicable November 10, ~~2017~~ 2018.

(3) When subsection (a)(1) is not applicable, the following requirements shall apply until November 10, ~~2017~~ 2018:

(A) The employer shall ensure that operators of equipment covered by this standard are competent to operate the equipment safely.

(B) Where an employee assigned to operate machinery does not have the required knowledge or ability to operate the equipment safely, the employer shall train that employee prior to operating the equipment. The employer shall ensure that each operator is evaluated to confirm that he/she understands the information provided in the training.

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NOTE: Authority cited: Section 142.3, Labor Code. Reference: Section 142.3, Labor Code.