

PLATE 1
NOTICE OF CRANE SAFETY DEFICIENCIES
 (Sample format--IS 162)

Equipment Operator: _____ Owner: _____

Address: _____ Address: _____

Description and location of equipment inspected: _____

Manufacturer: _____ Model No.: _____ Serial No.: _____

Owner I.D.: _____ Rated Capacity: _____

The following deficiencies were found to exist during the inspection, testing and/or examination of the above-referenced equipment on _____.

Description of Condition to be Corrected	Verification Date and Signature
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	

(See attached sheet for additional items or descriptions, if any.)

A certificate to operate the above-referenced equipment will not be issued until the items noted herein are corrected and verified as such by the undersigned.

A copy of this Notice, as well as any subsequent verification of corrections, shall be sent, as required, to the Division of Occupational Safety and Health. Labor Code 7375 and Sections 344.6,et.seq. and 4884,et.seq. of Title 8 of the California Code of Regulations prohibit the operation of any crane or derrick subject to the certification requirements thereof to be operated without a valid certification issued by a Division-licensed certifier or approved surveyor.

Licensed Certifier, Name: _____ License No.: _____

Address: _____

Approved Surveyor, Name: _____ Title: _____

Date: _____ Signature: _____