

# NEW CUSTOMER APPLICATION






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## **SPECIAL THANKS FROM OUR EMPLOYEES**

Our company, Missouri Crane, Inc. has been family owned and operated since 1993. We strive to provide an excellent combination of friendly service and professionalism both on and off of the job site. Our staff, operators, and their families greatly appreciate your work and hope that we can build a solid business relationship for the future.

- Michael J. Twillman (Vice President)

 (636) 441-4100  
 (636) 332-8061  
 [info@missouricrane.com](mailto:info@missouricrane.com)  
 [www.missouricrane.com](http://www.missouricrane.com)

Missouri Crane, Inc.  
29 East Highway N  
Wentzville, MO 63385



**MISSOURI CRANE, INC.**  
29 East Highway N  
Wentzville, MO 63385  
636-441-4100 - Office 636-332-8061 - Fax



### Applicant Information

Legal Business Name		Date	
Business Name (DBA)			
Address		City	State Zip
Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Years at Address	Years in Operation
Billing Address (If Different)		City	State Zip
Business Telephone		Business Fax	Emergency Telephone
Number of Employees		E-Mail Address	Website Address
Nature of Business		D & B Number (If Available)	
(Choose One)	Corporation <input type="checkbox"/>	Partnership <input type="checkbox"/>	Limited Liability <input type="checkbox"/> Sole Proprietor <input type="checkbox"/>
Purchase Order Required Per Invoice	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

### Owner Information

Name	Title	Soc. Sec. / Tax I.D. Number
Address		
Home Telephone Number	Driver's License Number	State Issued

### Bank Account Information

Name	Address	Account Number
Account Contact	Telephone	Fax Number

### Trade References

Name	Address	
Account Number	Telephone	Fax Number
Name	Address	
Account Number	Telephone	Fax Number
Name	Address	
Account Number	Telephone	Fax Number

### Credit Card Required



Number	Expiration	Authorized Name
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Being the cardholder, corporate officer, or authorized purchaser, by signing below I understand and agree to the terms set forth in this agreement, agree to pay, and specifically authorize to charge my credit card, for the services provided. I further agree that in the event my card becomes invalid, I will provide a new valid credit card upon request, to be charged for outstanding balances.



## MISSOURI CRANE, INC.

29 East Highway N  
Wentzville, MO 63385  
636-441-4100 - Office 636-332-8061 - Fax



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### Applicant Acceptance

The undersigned represents and warrants that all information is true, correct, and complete, and has read, accepted, and agrees to be bound by all terms and conditions as set forth in this document and as detailed in each rental document ordered by the Applicant or their agent(s). It is further understood and agreed that the Applicant specifically agrees and consents to Missouri Crane, Inc. investigating credit and trade payable histories and the utilization of credit reporting services to secure this information. In order to secure this credit accommodation, the Applicant authorizes the now and future use of consumer credit reports and the full and complete release of credit and account information from the bank references noted in the Application. Faxed copies will be treated as originals.

---

Signature

Date

---

Print Name and Title

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### Personal Guarantee

The undersigned hereby unconditionally guarantee(s) the full and prompt payment to Missouri Crane, Inc. when due of all indebtedness, obligations, and liabilities of the Applicant named in this Application of Credit, including all amounts currently owing and arising in the future, including any service charges, interest, attorney(s) fees, court and collection costs. The Applicant also agrees to be personally and unconditionally bound by all terms of this Application. This guarantee will continue in full force and effect until all amounts payable by Applicant to Missouri Crane, Inc. have been paid and the Applicant account has been terminated. The Applicant guarantor hereby waives presentment demand of payment, filing, or proof of claim, any right to require a proceeding first against Applicant, protest notice and all demands whatsoever. The Applicant further authorizes and consents to the now and future use of personal consumer credit reports for information in support of this guarantee.

---

Signature

Date

---

Print Name and Title

Social Security Number

Date of Birth

---

### Credit Terms and Conditions

Payments for our invoices are due and payable upon receipt of invoice. A late payment charge of 1 1/2% per month (an annual percentage of 18%) will be made on any balance more than 30 days after invoice date. If the amount due is collected by or through an attorney after maturity, lessee agrees to pay reasonable attorney(s) fees. Notice to Owner : Failure of this contractor to pay those persons supplying material or services to complete this contract can result in the filing of a mechanic's lien on the property which is the subject of this contract pursuant to Chapter 429 RSMo. To avoid this result you may ask this contractor for "Lien Waivers" from all persons supplying material or services for the work described in the contract. Failure to secure lien waivers may result in your paying for labor and material twice.

The Applicant agrees that if equipment and services are rented for more than 1 week, Missouri Crane, Inc., can issue periodic unsigned invoices for the rental charges due. Such periodic invoices are due and payable upon receipt.

The Applicant and its Agent(s) agree to indemnify and hold harmless Missouri Crane, Inc. and its agents, officers, and employees from and against any and all claims, demands, actions, damages, and expenses in conjunction with the loss of life, personal injury, damage to property, debts, and all other claims arising from services, equipment, or merchandise furnished under any rental contract.

The Applicant agrees to pay all reasonable attorney(s) fees, collection costs, and court costs incurred by Missouri Crane, Inc. to enforce these terms and conditions. The Applicant consents to the Jurisdiction and a waiver of a jury trial.

For those Applicants which require a Purchase Order on each invoice, equipment cannot be released unless a Purchase Order is provided. Applicants that have restricted who can order or sign for equipment must provide an authorized list with this Application.

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### Important Notice

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against Applicants on the basis of race, color, religion, national origin, gender, marital status, age (providing the applicant has the capacity to enter into a binding contract) because all or part of the Applicant's income is derived from any public assistance program, or because the Applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the creditor is the Federal Trade Commission Equal Credit Opportunity, Washington, DC 20580.

## TERMS AND CONDITIONS

( Revised 01/2011 )

1. The Lessor (Missouri Crane, Inc.) hereby leases the equipment described on the reverse side and furnishes operational personnel to the Lessee heretofore named subject to the following terms and conditions :
  2. No other agreements except as otherwise mutually agreed in writing, this document is the complete agreement of the parties and supersedes all other agreements or understandings, written or oral.
  3. Lessee agrees that the equipment and all persons operating such equipment, including Lessor's employees, are under Lessee's exclusive jurisdiction, supervision and control and agrees to indemnify and save Lessor, its employees and agents harmless from all claims for death or injury to persons, including Lessor's employees, and from all loss, damage or injury to property, including the equipment, arising in any manner out of all claims specified herein, including all court and / or arbitration costs, filing fees, attorneys fees and costs of settlement.
  4. Lessee shall not be required to indemnify Lessor for its sole negligence, but, Lessor's liability for damage caused by the sole negligence of Lessor, its agents and employees, hereunder shall be limited to the amount of Lessor's liability insurance.
  5. Lessor is to be paid for equipment and labor in the event that delays are beyond its control. These delays may include: acts of God, inspection delays, traffic conditions, etc. In the event that ground conditions are such that equipment becomes stuck or collapses due to mud, over dig, and / or fill areas then it is the Lessee's responsibility to pay for towing costs and any resulting equipment damage.
  6. Lessee is to provide qualified person to use the Standard Crane and Derrick Signals in accordance with American Standard B 30.21943 to direct the operator and equipment at all times when applicable. Lessee further agrees to use said equipment in accordance with the manufacturer's instructions and agrees not to exceed the manufacturer's rated load capacities for such or similar equipment. Lessee expressly agrees that counterweight in excess of the manufacturer's specifications shall not be used.
  7. Lessee assumes all liability for the adequacy of design or the strength or any lifting lug or device embedded in or attached to any object.
  8. Lessee hereby waives all claims against Lessor for any delay or loss of materials or labor costs by reason of any shutdown, delays, or failure of the equipment for any reason.
  9. Lessee is to provide access to site with suitable working conditions for the equipment being provided by Lessor. Lessee to provide road closure permits if necessary. Location of utilities and shielding of overhead power lines, deemed to be hazardous to the operation of the equipment, are to be provided by Lessee prior to work. Failure to provide any of these can result in a minimum charge of two hours, including drive time portal to portal our yards and cancellation of the work.
  10. Lessee is required to provide adequate security of Lessor's equipment when left unattended by Lessee's request on nights, weekends, days not worked and is responsible for such damages as vandalism, theft, fire or accidental damage caused by Lessee's other equipment at the site.
  11. Rates are subject to local St. Louis metro areas and costs are considered as portal to portal our yards. Workday consists of a standard, Monday through Friday, eight hour day with ½ hour for lunch. Overtime rates apply for equipment and labor. Lessee agrees to pay minimum and overtime rates. Rates are subject to change without notice. Current rates can be provided upon request.
  12. There will be a minimum of two hours, including drive time portal to portal, at prevailing rates charged when a Lessee orders specific equipment and it is inadequate in capacity and cannot perform the hoist, in the event the site is unsafe due to Lessor's employee opinion and / or the equipment cannot safely perform due to ground or weather conditions.
  13. Payments for our invoices are due and payable upon receipt of invoice. A late payment charge of 1 ½% per month (an annual percentage of 18%) will be made on any balance more than 30 days after invoice date. If the amount due is collected by or through an attorney after maturity, Lessee agrees to pay reasonable attorney fees. If the amount is collected by or through a collection agency after maturity then Lessee agrees to pay all reasonable fees associated with collection costs and expenses.
  14. Any account that becomes delinquent may be placed on a cash only basis for any previous amounts due as well as the current amount due.
  15. In the event of an accident resulting in death or injury to persons, including Lessor's employees or agents, the loss, damage or injury to property, including the equipment, arising from the sole negligence of the Lessee, the Lessee agrees to pay damages, including but not limited to court and / or arbitration costs, equipment replacement and recovery, medical expenses, filing fees, attorneys fees and costs of the settlement.
  16. The Lessee agrees to pay all reasonable attorney(s) fees, collections costs, and court costs incurred by Missouri Crane, Inc. to enforce these terms and conditions. The Lessee consents to the Jurisdiction and a waiver of a jury trial.
- A safety program is located on each vehicle or crane. OSHA requires tag lines and hard hats be used at all times. Hoisting is never allowed over individuals. Areas of hoisting are to be secured. If these items are not executed, then our company will not be liable for fines and accidents that occur and we can refuse to hoist.

**NOTICE TO OWNER: FAILURE OF THIS CONTRACTOR TO PAY THOSE PERSONS SUPPLYING MATERIAL OR SERVICES TO COMPLETE THIS CONTRACT CAN RESULT IN THE FILING OF A MECHANIC'S LIEN ON THE PROPERTY WHICH IS THE SUBJECT OF THIS CONTRACT PURSUANT TO CHAPTER 429 RSMo. TO AVOID THIS RESULT YOU MAY ASK THIS CONTRACTOR FOR "LIEN WAVERS" FROM ALL PERSONS SUPPLYING MATERIAL OR SERVICES FOR THE WORK DESCRIBED IN THE CONTRACT. FAILURE TO SECURE LIEN WAVERS MAY RESULT IN YOUR PAYING FOR LABOR AND MATERIAL TWICE.**

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*THE FOLLOWING AUTHORIZATION REQUIRED FOR CRANE RENTAL SERVICE*

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

Authorized Person : \_\_\_\_\_

Dated : \_\_\_\_\_

Signature : \_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/24/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Lang Insurance Service 3920 S Old Highway 94 Suite 39 St. Charles MO 63304	<b>CONTACT NAME:</b> Denise Keary <b>PHONE (A/C, No. Ext):</b> (636) 229-7000 <b>E-MAIL ADDRESS:</b> Denise@langinsurance.com <b>FAX (A/C, No):</b> (636) 229-7001														
<b>INSURED</b> Missouri Crane, Inc. 29 East Highway N Wentzville MO 63385-5901	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A Nova Casualty Company</td><td>42552</td></tr><tr><td>INSURER B Missouri Employers Mutual</td><td>10191</td></tr><tr><td>INSURER C:</td><td></td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A Nova Casualty Company	42552	INSURER B Missouri Employers Mutual	10191	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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**COVERAGES****CERTIFICATE NUMBER:** 2015 Master Liability**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$5,000,000 total per project aggregate GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		JSC-CL-0010668-1	9/1/2015	9/1/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS 19 <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		JSC-CL-0010668-1	9/1/2015	9/1/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ UM/UIM CSL BI & PD \$ 1,000,000
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB DED RETENTION \$	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE				EACH OCCURRENCE \$ AGGREGATE \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N/A	2013746-00	9/1/2015	9/1/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	<b>Inland Marine - SpecialForm</b> Ded-2% w/\$2500 min		JSC-CL-0010668-1	9/1/2015	9/1/2016	Scheduled Equipment \$1,085,000 Leased & Rented \$250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

Sample Certificate  
Contact Lang Insurance for Specific Certificate

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Steve Lang/DENISE

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## Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return) <b>Missouri Crane, Inc.</b>	
Business name/disregarded entity name, if different from above	
Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	
<input type="checkbox"/> Exempt payee	
Address (number, street, and apt. or suite no.) <b>29 East Highway N</b> City, state, and ZIP code <b>Wentzville, MO 63385</b>	Requester's name and address (optional)
List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-					
Employer identification number								
4	3	-	1	6	3	9	2	9

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶ 01 / 01 / 2012

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.



# **MISSOURI CRANE INC**

## **BASIC SAFETY RULES FOR CRANE RENTAL**

1. Bracket straps and approved lifting lugs are to be attached only by qualified welders; cleaned, then inspected, circled and initialed by qualified supervision before use. Never use blank nuts for lifting.
2. Follow proper lifting techniques: bend your knees, lift with your legs, and get help with heavy loads.
3. A safety harness with hook point at or near the center of the back shall be used when no other form of fall Approved hard hats and approved safety glasses with side shields must be worn at all times during working hours. Tinted safety glasses will not be worn inside closed structures or at night.
4. Double eye protection (safety glasses with side shields, plus appropriate full face shield or appropriate monogoggles) will be used for welding, burning, chipping, deslagging, grinding, power brushing, sandblasting, filing sand pot, concrete demolition, handling acids or caustics, etc.
5. Hearing protection must be used by all personnel in designated areas or when chipping, grinding, power brushing, sandblasting, jack hammering, arc gouging or working within 50 feet or arc gouging operations.
6. Employees must wear appropriate work gloves, long sleeve shirts, long trousers, and sturdy work boots while working. (Steel-toe safety boots are recommended and will be worn where required by law or site rules.)
7. Climbing may be performed only by way of ladders, stairways or other safe means provided for this purpose. Do not carry tools and/or equipment when climbing ladders. Ladders must extend 3 feet above the upper landing surface or a grab rail must be provided at 3 feet above the landing surface.
8. All work from crane or derrick suspended work platforms will be done per GO 525 (Suspended Work Platform Worksheet.
9. Riders are not permitted on moving equipment, rigging, or loads.
10. Working under suspended loads, loads being hoisted, or between loads being hoisted and a stationary object is not permitted.
11. Only qualified operators are to operate lifting equipment. Only a foreman appointed and qualified signalman may transmit signals to the operator on hoisting equipment.
12. Equipment will not work over or nearer than 15 feet to a power line of 220 volts or higher. Power lines over 50,000 volts require greater clearance.
13. Equipment is not to be used beyond rated capacities. Capacity charts must be mounted on the equipment.
14. The tail swing area of counterweighted equipment must be barricaded when counterweight is less than 7 feet above grade.
15. Guylines shall be flagged where interference with any operation could occur.
16. All trenches over 4 feet deep must have adequate access and be protected from cave-in by shoring or by sloping back the sides a minimum 1 ½ to 1 (unless certified soil type allows less slope) or protected by an engineered trench box.
17. All openings in the work area (on the ground or on the structure) which personnel, materials, tools or equipment may fall into or through must be barricaded or covered.
18. Protection must be provided over manways and doorways used for access where there are overhead hazards. Personnel manways must not be obstructed by equipment.
19. All loose items on scaffolds or platforms must be secured against falling or stored in approved tool containers. Never overload scaffolds. Secure bracket posts to stubs.
20. All scaffold boards must be tested before use on each job and visually inspected each week. Ends must be bolted or have corrugated steel joint fasteners to prevent splitting.
21. Minimum scaffold width requirements are 24 inches and 30 inches (two 12-inch or three 10-inch boards). Toe boards are required on all scaffolds 10 feet or higher above grade, except for a tank scaffold with a barricade.
22. Scaffold trap doors must be used when access is from underneath.
23. protection is available. The approved lanyard must be hooked-off at or above the "D" ring attachment point of the lanyard to safety harness.
24. All fuel powered equipment must be shut down for refueling Only approved, properly labeled safety cans or refueling equipment shall be used – and must be bonded to the unit being fueled.
25. Flammables and other chemicals are to be properly labeled, in proper containers, and stored in a designated, vented area.
26. Tools and equipment requiring guards shall not be used unless the required guards are in place.
27. All electrical equipment, fuel tanks, and crew shacks with power must be individually grounded or wired to a grounded grid system.
28. Ground Fault Circuit Interrupter (GFCIs) or Earth Leakage Circuit Breaker (ELCBs) will be used on all construction 110/120 volts and single phase 220/240 volts power systems. Assure equipment grounding requirements will be met on all other power systems.
29. No one is to perform equipment or electrical repairs unless specifically trained and authorized to do so by the foreman. All lockout/tagout procedures will be followed during repairs. (Equipment modifications require corporate approval.)
30. Good housekeeping to be maintained on shop, vehicles, equipment, and jobsite.
31. All piping and process lines shall be physically isolated and adequately blinded from vessels on which any work is being performed.
32. Only authorized personnel are permitted on the job site. All visitors are required to obtain permission from the foreman before entering construction area. All visitors and Subcontractors will comply with MCI Crane, Inc. customer safety rules.
33. Fighting and equipment abuse are prohibited.
34. The use, possession, or being under the influence of illegal drugs or intoxicants is prohibited on the job site or shop. All prescription drug use must be cleared by site foreman.
35. Obey all safety rules, safety signs, and barriers.
36. It is recommended that long hair or jewelry (including rings and earrings) should not be worn. (Site or job conditions may make this mandatory)
37. All personnel must comply with the Hazard Communication Program and know where Material Safety Data Sheets (MSDSs) are kept.
38. All personnel required to wear respirators will be clean-shaven, fit-tested, and trained.
39. Personnel will not enter a confined space without authorization from the site foreman. All permit conditions and confined space requirements will be followed.
40. No firearms or other weapons are permitted.
41. All accidents, regardless of severity, are to be reported immediately to the site foreman. Get first aid promptly. Report or correct all unsafe conditions.
42. It is your responsibility to obey the safety rules. Violations of safety rules is cause for discipline – up to and including discharge.



Signature: \_\_\_\_\_  
I have read the above and agree to follow specified procedures.

# Mobile Crane Hand Signals



**Hoist**



**Lower**



**Use Main Hoist**



**Use Whipline**



**Raise Boom**



**Lower Boom**



**Move Slowly**



**Raise the Boom  
Lower the Load**



**Lower the Boom  
Raise the Load**



**Swing**



**Stop**



**Emergency Stop**



**Travel**



**Dog Everything**



**Travel  
(Both Tracks)**



**Travel  
(One Track)**



**Extend Boom**



**Retract Boom**



**Extend Boom  
(One Hand)**



**Retract Boom  
(One Hand)**