12HOIST4U
Hoisting & Lifting Recruitmentservices

| Week |
| --- |
| |

Name .....

Company.: .....

| day | date | time in | time out | break time ** | hours worked | travel |
| --- | --- | --- | --- | --- | --- | --- |
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| | | | Total amount of hours | | | |

* part of hours should be rounded to: 15 min = 0,25 30 min = 0,50 45 min = 0,75 ** Note the break time and deduct from the total work time

Remarks:

**Company approval:**
Signature, name and company stamp

Hereby we also declare to understand and accept the General Terms and Conditions of 12hoist4u

**Employee approval:**

| Questions below are mandatory: | Yes | No | Action taken: |
| --- | --- | --- | --- |
| Have you attended the Site/Project Safety Induction? | | | |
| Have you seen the Risk Assessment/Method Statement/Lifting Plan? | | | |
| Is there an Operators' Manual available for the equipment in use? | | | |
| All Crane/Lifting Tackle certification available? | | | |
| All operational functions working? | | | |

**It is never allowed to work outside the rated capacity of the machine or to by-pass any limiting device of the machine!**



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