



SECTION 12

HELICOPTER LIFT PLAN



1. **PURPOSE:** The purpose of this plan is to establish minimum safety requirements for the helicopter lifts at Maul Electric, Inc projects. The plan must be specific to the facility and the specific lift. **Lifts for any project must be discussed with the Safety Director, documented, and approved prior to implementation.**

A. **SCOPE OF WORK:** The scope of work for this project includes

B. **RESPONSIBILITY:** The Project Manager and Project Superintendent will require compliance with procedures and documentation mandated by this plan is in compliance. It is the responsibility of _____ to ensure that all FAA and municipal requirements are in compliance. The safety of the workers, community and property will not be compromised. Unsafe weather conditions, equipment conditions, site conditions and unsafe actions will be cause to immediately abort the lift procedure.

1. _____ shall be responsible to ensure that a helicopter, flight plan and use of airspace comply with applicable regulations of the Federal Aviation Administration.
2. The Helicopter operator shall be responsible for size, weight restrictions, and manner in which loads are connected to the helicopter and for the overall safety of the lift.
3. _____ shall be responsible for the safety of the lift and landing zone as well as safety requirements established by this policy, the provision of sufficient qualified and competent personnel required for safe helicopter loading, unloading, and operations.

C. **DOCUMENTS:**

1. All insurance requirements established by the subcontract will be on file with the Project Manager.
2. A signed and properly executed subcontract document will be on file with the Project Manager.
3. Copies of valid permits, secured by _____ will be on file with the Project Manager.
4. The Safety Policies of _____ will be on file with the Project Manager.
5. The plan and the lift plan of _____ will be reviewed with all affected personnel. Attendance sheets and minutes of this meeting will be on file with the Project Manager.
6. A pre-lift briefing will be conducted on the morning of the lift between the ground crew and the helicopter pilot. This meeting shall include a description of the task, the plan of operation, and safety requirements. Documentation of this meeting, including



attendance and content shall be provided to the Project Manager prior to the lift.

D. HAZARD ELIMINATION:

1. **Rigging:** All rigging slings, hoists and tag lines will be inspected by a competent person from _____ prior to use. Documentation of the inspection will be provided to the company Project Superintendent prior to lift.
 - a) Slings and tag lines shall be properly slung and of length that will not permit their being drawn up into the rotors. Preset sleeve, swedged eyes, or equivalent means shall be used for all freely suspended loads to prevent hand splices from spinning open or cable clamps from loosening.
 - b) All electrically operated cargo hooks shall have the electrical activating device designed and installed to prevent inadvertent operation. Cargo hooks shall be equipped with an emergency mechanical control for releasing the load and shall be tested prior to the lift to determine the proper function of the release, electrically and mechanically.
2. **Hooking and Unhooking Loads:** Workers required to unhook loads beneath hovering helicopters will be provided with a safe route of access and egress. ***Work, other than hooking and unhooking loads will not be performed under hovering craft.***
3. **Static Charges:** Static charge on the suspended load will be dissipated by a grounding device before grounding personnel touch the suspended load, or workers who contact the load must be protected by appropriate rubber gloves.
4. **Housekeeping:** The lift/landing zone and roof areas will be inspected prior to lift by representatives of _____ and the company Project Superintendent prior to lift. Loose gear and objects within 100 feet of the place of the lifting the load, depositing the load or area otherwise affected by the rotor down wash shall be removed or secured.
5. **Communications:** Radio communications between the helicopter pilot and ground crew will be checked and adequate prior to lift. The signal person will be clearly identified by use of a traffic vest. ***Radio communication between helicopter and ground crew will be the primary contact. In the event of communication failure, hand signals shall be used and in compliance with Figure N-1, 29 CFR 1926.551 (attached).***



6. **Traffic Control:**
 - a) Entrance to the lift and landing zone will be hard barricaded to prevent vehicle entry. One person will be provided to prevent removal of barricades and vehicle or personnel entry access points.
 - b) Red "DANGER" Tape will be installed, establishing a safety zone to prevent accidental pedestrian entry into the area.
 - c) Vehicular traffic and pedestrian entry to the area will be controlled by hard barricade or a manned "DANGER" taped control line.
7. **Approach Distance:** No unauthorized person shall be allowed to approach within 75 feet of helicopter while rotor blades are turning.
8. **Approaching the Helicopter:** Approaching or leaving the helicopter when blades are rotating shall be accomplished in a route of travel that will keep the individual in full view of the pilot and in a crouched position.
9. **Load Inspection:** Load inspection will be the responsibility of _____ . All electrical connections or process connections (i.e. drain lines, natural gas connections); grounding lines or other anchorage points shall be disconnected prior to the lift. The load will be inspected to ensure no loose materials or fittings are stored on the equipment.
10. **Visibility:** The employer shall take all practical precautions to eliminate the potential for reduced visibility. Employees shall exercise extreme caution to keep clear of main and stabilizing rotors at all times but especially during times of reduced visibility.
11. **Fall Protection:** Due to the nature of the work, dimension of the roof and work area, a risk analysis must be performed. General rules are established as follows:
 - a) All access to the roof will be accomplished via the access hatch located at the grid line 10 (see attached plan). When all personnel have entered the roof area, the hatch will be closed.
 - b) A clearly identified walkway will be established which will prohibit worker access to areas within 10 feet of unprotected roof edges or skylights.
 - c) Two trained and competent persons will be posted in positions that will allow clear visibility of workers.
 - d) These individuals will act as Safety Watch with no additionally assigned duties.
 - e) They will be equipped with air horns that will be sounded in a long blast when any worker approaches ten (10) feet of an unprotected sky light or roof edge.



12. **Personnel Protective Equipment:** All personnel involved in this procedure will be equipped with the following:
 - a) Safety headwear with chin-strap.
 - b) Safety glasses and side shields.
 - c) Hearing protection.
 - d) Loose fitting clothing, likely to flap in the down wash and potentially snag on the hoist line, shall not be worn.
13. **Fire Protection:** Fire extinguishers will be located in the loading, landing, and lift zone.
14. **Building Security:** For removal and placement of the units located adjacent to occupied space, the area must be evacuated before a lift. If at all possible, the building must be cleared of all occupants before remaining lifts can take place. If this is not possible, a minimum unoccupied perimeter of 100 feet on each side of the flight path must be established and maintained.



CERTIFICATION OF TRAINING

I HEREBY CERTIFY THAT I HAVE RECEIVED TRAINING FROM MY EMPLOYER REGARDING THE SAFETY PRACTICES AND PROCEDURES REQUIRED BY _____ AND _____ FOR THIS HELICOPTER LIFT PROCEDURE. I FURTHER CERTIFY THAT I UNDERSTOOD THE TRAINING MATERIAL AND THE MATERIAL PRESENTED. I UNDERSTAND THAT I AM TO IMMEDIATELY NOTIFY THE DESIGNATED SITE SAFETY REPRESENTATIVE IF ANY UNSAFE CONDITION OR ACTION IS NOTICED DURING THIS PROCEDURE.

Date	Name of Individual	Signature	Employer

NAME OF TRAINER: _____

DATE OF TRAINING: _____

LOCATION OF TRAINING _____

SIGNATURE OF TRAINER _____