

Blanchard Refining Company LLC	Galveston Bay Refinery	
Title: ME-3D Boom Lift Operator Pre-Use Inspection Checklist for HF Alky Units	Doc Number: RSW-FORM-000035-GB	Rev No: 0

ME-3D Form – (MEWP) Mobile Elevated Work Platform Operator Pre-Use Inspection Checklist for HF Alky Unit

Equipment Number _____

Work Description/Location: _____

1) Have details of the man lift required work (path to be taken, equipment swing radius, man lift's reach, etc.) been reviewed with Operations and Maintenance supervision?
 Yes _____ No _____

Comments: (If NO, explain why): _____

2) Will all work activities in the immediate work area (within the swing radius of the boom) be stopped during the lift?
 Yes _____ No _____

Comments (If NO, explain why): _____

3) Has a communication link been established with the HF Alky Unit Operations Personnel?
 Yes _____ No _____ **IF NO, JOB CANNOT PROCEED.**

Comments: _____

4) Are the HF Mitigation System and safety showers in operable condition?
 Yes _____ No _____ **IF NO, JOB CANNOT PROCEED.**

Comments: _____

5) Is the refinery emergency alarm system available to be activated?
 Yes _____ No _____ **IF NO, JOB CANNOT PROCEED.**

Comments: _____

6) The Man lift Pre-Operational Check-List (Appendix B) has been filled out.

Equipment Operator: _____ / _____ Date: _____
Printed Name *Signature*

NOTE: This form is to be attached to the work permit for the work.

Approval Signatures and Date

Maintenance Foreman/Contractor Coordinator: _____ Date: _____

Shift Foreman: _____ Date: _____