Blanchard Refining Company LLC	Galveston Bay Refinery	
Title: ME-3D Boom Lift Operator Pre-Use Inspection Checklist for	Doc Number: RSW-FORM-000035-GB	Rev No: 1
HF Alky Units		

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

Equipment Number \_\_\_\_\_

Work Description/Location:			
1)	Have details of the MEWP required work (path to be taken, equipment swing radius, boom lift's reach, etc.) because reviewed with Operations and Maintenance supervision?  Yes No	en	
Co	nments: (If NO, explain why):		
2)	Will all work activities in the immediate work area (within the swing radius of the boom) be stopped during MEWP operation? 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.		
Co	nments:		
5)	5) Is the refinery emergency alarm system available to be activated?  Yes No IF NO, JOB CANNOT PROCEED.		
Co	nments:		
6)	The Boom Lift Operator Pre-Use Inspection Checklist (ME-3A) or Scissor Lift Operator Pre-Use Inspection Checklist (ME-3B) has been filled out.  Yes No IF NO, JOB CANNOT PROCEED.	st	
Ed	lipment Operator: / Date: Printed Name Signature		
NOTE: This form is to be attached to the work permit for the work.			
Approval Signatures and Date			
Ma	ntenance Foreman/Contractor Coordinator: Date:		
Sh	ft Foreman: Date:		