## **Crane Information Form**

For instructions and guidance on how to fill out the Crane Information Form, click here: https://ncc.navfac.navy.mil/Popular-Links/DOWNLOADS/ or contact the Navy Crane Center.

|             | Crane Center.  NTS OF CONTACT     |                    |  |                         | Date                                       |  |  |
|-------------|-----------------------------------|--------------------|--|-------------------------|--|--|--|
| I. POIN     | 1A. PROJECT MANAGER               | 1B. END USER       |  | 1C. CERTIFYING OFFICIAL | 1D. FACILITY<br>ENGINEER/DESIGN<br>MANAGER |  |  |
| Name:       |                                   |                    |  |                         |  |  |  |
| Activity:   |                                   |                    |  |                         |  |  |  |
| Phone:      |                                   |                    |  |                         |  |  |  |
|             |                                   |                    |  |                         |  |  |  |
| Email:      |                                   |                    |  |                         |  |  |  |
| 2. LOCA     | ATION                             |                    |  |                         |  |  |  |
|             | 2A. Crane Location Inforn         | nation             |  | 2B. Building Inf        | formation                                  |  |  |
| Activity    |                                   |                    | Proj   | ect Name                |  |  |  |
| Activity U  | JIC# Activity                     | DODAAC#            | Buil   | ding Name / #           |  |  |  |
| -<br>       | 2C. Crane Installation Infor      |                    | Room, Area, or Bay for Crane New Building? (Y/N) |                         |  |  |  |
| Dosired D   | Pate for Crane Operation          |                    | -  | -                       | <del>-</del> , <u></u>                     |  |  |
| Desired D   | die für Craffe Operation          |                    |  |                         |  |  |  |
| 3. QUA      | NTITY AND TYPE OF CR              | PANF(S)            |  |                         |  |  |  |
|             | per of Identical                  |                    |  |                         |  |  |  |
| Cranes Re   |                                   |                    |  |                         |  |  |  |
| 3B. Hoist   | = =                               | <del></del>        |  |                         | <del></del>                                |  |  |
| Litting     | g Means:                          |                    |  |                         |  |  |  |
| Hoist       | Power Source:                     |                    |  |                         |  |  |  |
| 3C. Crane   | Tung                              |                    |  |                         |  |  |  |
| JC. Crane   | Type.                             |                    |  |                         |  |  |  |
| Runw        | ау Туре:                          |                    |  |                         |  |  |  |
| Powe        | r Source:                         |                    |  |                         |  |  |  |
|             |                                   |                    |  |                         |  |  |  |
| 3D. Trolle  | y Type:                           |                    |  |                         |  |  |  |
| Trolle      | ey Power Source                   |                    |  | - <u></u>               |  |  |  |
|             | -                                 |                    |  |                         |  |  |  |
|             | NE/RUNWAY CAPACITY                | <u>(</u>           |  |                         |  |  |  |
|             | Capacities                        |                    |  |                         |  |  |  |
| 1. Wain 🗖   | loist Capacity:                   |                    |  |                         |  |  |  |
| 2. Is an Aı | uxiliary Hoist desired? (Y/N)     |                    |  |                         |  |  |  |
|             | f Ailiam. Haist Canasitus         |                    |  |                         |  |  |  |
| a. II       | f yes, Auxiliary Hoist Capacity:  |                    |  |                         |  |  |  |
| -           | ple Trolleys                      |                    |  |                         |  |  |  |
| 1. Is more  | e than one trolley desired on the | same bridge? (Y/N) |  |                         |  |  |  |

| a. If yes, provide the follow   | wing:  | Trolley A Capacity:                      |                                |
|---|--|--|--------------------------------|
|   |  | Trolley B Capacity:                      |                                |
|   |  | Bridge Capacity:                         |                                |
| <ul><li>b. If yes, is tandem operat</li><li>c. If an Auxiliary Hoist is re</li></ul>  | · · · · · · · · · · · · · · · · · · ·          |  | one? (A/B)                     |
| 4C. Additional Cranes  1. Are there additional cranes or a. If yes, describe quantiti |  | _  |                                |
| 4D. Crane Addition/Removal  | ove additional evenes 2 (V/N)                  |  |                                |
| 1. Are there plans to add or rem a. If yes, please describe p                         | lans for the additional cranes:                | _  |                                |
| 4E. Is the crane runway existing  | · · · · · · · · · · · · · · · · · · ·          | nave a current rail survey for this      | s facility (required for       |
| 5. CRANE SERVICE AND  | <u> </u>                                       | ,  |                                |
| 5A. What service of work is the   |  |  |                                |
| 5B. Class of Service  |  |  |                                |
| What is the required CMAA #70,  | #74/ ASME HST Class of                         |  |                                |
| Service? If class of service is unknown, plo  | oasa provide the number of esti                | mated main hoist lifts for the fo        | —<br>Howing cases:             |
|   | ease provide the number of esti                | 50% Rated load lifts in 8-hou            | <del>-</del>                   |
| Rated load lifts in 8-hour shift  |  | _ shift                                  |                                |
| 75% Rated load lifts in 8-hour shift  |  | _ 25% Rated load lifts in 8 hou<br>shift | ır                             |
| Total # of main hoist lifts per 24  | hour period                                    |  | 24 hour period (if applicable) |
| 5C. Provide a brief explanation   | 1  |  |                                |
| of the lifting operations to be   |  |  |                                |
| performed by this crane.  5D. Operating Environment  1. Classification                |  |  |                                |
| Non-Hazardous   | Hazardous                                      | Corrosive                                | Dusty                          |
| Ordnance/Explosive<br>Handling Service  | Hot (Molten) Metal<br>Service                  | Other:                                   |                                |
| 2. If the area is hazardous, provi<br>NEC Class:                                      | de the following information:<br>NEC Division: | NEC Group:                               |                                |
| 2a. Height above the floor hazar  | dous protection is required:                   |  |                                |

| 3. If the crane is ordnance hand  | ling, are insulated links required? (  | (/N)                                    |
|---|--|---|
| 4. Is captivation required? (Y/N)   | While NCC is not responsible for crane captivation, please explain your application. |   |
| 5. Are drips pans or oil/grease tight gear cases required for containment? (Y/N)            | If yes, please provide a brief explanation.  |   |
| 6. Where will the crane operate? 7. What are the ambient                                    |  |   |
| operating temperatures for the crane?   | High Temperature:°F  | Low Temperature: °F                     |
| 8. Is seismic a factor with this facility? If Yes, please provide the following categories: | Design Category: Risk Category:  |   |
|   |  |   |
| 6. CRANE CONTROLS   |  |   |
| 6A. Methods of Crane Control  1. What will be the primary met                               | thod of crane control?   |   |
| 2. Are secondary crane controls   |  | s, which type?                          |
|   | ne has pendant controls, please ans<br>at apply to the pendant controls on           |   |
|   | ,  |   |
| Lockable  | Detachable   | Retractable Indicator Lights on Pendant |
| 2. Pendant Control Movement:  |  |   |
|   | has radio controls, please answer the radio co                                       |   |
|   |  |   |
| 2. Frequency Range:   | Licensed (F0 Part 90)  | CC Unlicensed (FCC Part 15)             |
|   | as cab controls, please answer the cat apply to the cab controls on this             |   |
| Lockable  | Controls on operator's chair   | Controls on separate console            |
| 2. Cab design required:   |  |   |
|   |  |   |
| Enclosed  | Open   | Skeleton (Radio Controlled)             |
| Enclosed  3. Cab climate control required:  |  | Skeleton (Radio Controlled)             |
|   |  | Skeleton (Radio Controlled) Fan Cooled  |
| 3. Cab climate control required:  |  |   |
| 3. Cab climate control required: Heated 4. Cab access required: From crane                  | Air Conditioned<br>From building   |   |
| 3. Cab climate control required:  Heated 4. Cab access required:                            | Air Conditioned<br>From building   |   |

| 7. CRANE SPEE                           | :DS                             |                    |                           |                   |                                   |
|---|---------------------------------|--------------------|---------------------------|-------------------|-----------------------------------|
| 7A. Please provide                      | information on the d            | esired speed ra    | nges for the crane. Con   | tact Navy Crane   | Center if assistance is required. |
| 1. Bridge Max Spee                      | d:F                             | t/Min              | Bridge Min Speed:         | F                 | t/Min                             |
| 2. Trolley Max Spee                     | d:F                             | t/Min              | Trolley Min Speed:        | F                 | t/Min                             |
| 3. Main Hoist Max                       | Speed: F                        | t/Min              | Main Hoist Min Spee       | ed: F             | t/Min                             |
| 4. Auxiliary Hoist M                    | ax Speed: F                     | t/Min              | Auxiliary Hoist Min S     | peed: F           | t/Min                             |
| 5. Are the speeds li                    | sted above existing?            | (Y/N)              |                           |                   |                                   |
| _                                       | e existing electrical sy        |                    | of handling the desired   | crane             |                                   |
|   | selector switch requi           | ired for precise   | positioning? (Y/N)        |                   |                                   |
|   |                                 |                    | P                         |                   |                                   |
|   |                                 |                    |                           | <del></del>       |                                   |
| a. If yes, wha                          | t is the desired perce          | entage of max s    | peed? (TYP. 25%)          |                   |                                   |
|   |                                 |                    |                           |                   |                                   |
| 8. CRANE ELEC                           | TRICAL DESIGN                   | J                  |                           |                   |                                   |
| 8A. Crane Electrifica                   | ation                           |                    |                           |                   |                                   |
| 1. Please indicate the                  | ne preferred crane ru           | inway electrifica  | ation type:               |                   |                                   |
| 2. Please indicate w                    | ho will be supplying            | the crane runw     | ay conductors:            |                   |                                   |
| 3. If the crane runw                    | ay conductors are ex            | isting or to be p  | provided by the buildin   | g contractor, ple | ease provide the following:       |
| Conductor Size:                         |                                 | Conductor N        | Manufacturer's Name a     | nd Model #:       |                                   |
|   | A                               |                    |                           |                   |                                   |
|   |                                 | ng of the brancl   | h circuit supplying the o | crane?            |                                   |
|   |                                 |                    |                           |                   |                                   |
| Voltage:                                | v                               | Current:           | А                         |                   |                                   |
| 5. What is the locat                    | ion and size of the ex          | kisting electrical | disconnect switch/circ    | cuit breaker?     |                                   |
| a. Location: _                          |                                 |                    |                           |                   |                                   |
| b. Frame Size                           | :                               |                    |                           |                   |                                   |
| 5. Francisco / Girano                   | it Dunglan Cina.                |                    |                           |                   |                                   |
| c. Fuse/Circu<br>8B. Trolley Electrific |                                 |                    |                           | _                 |                                   |
| •                                       | ation<br>ne preferred trolley e | loctrification tu  | ıno:                      |                   |                                   |
| 8C. Electrical Contro                   |                                 | ectification ty    | pe.                       |                   |                                   |
|   |                                 | itrol desired for  | the crane's motors. Co    | ontact the Navy   | Crane Center if assistance is     |
| required.                               |                                 |                    |                           |                   |                                   |
| 1. Main Hoist                           | Inverter<br>(Speed Points)      | Inverter           | (Infinitely Variable)     | 2 Speed           | Other:                            |
| 2. Auxiliary Hoist                      | Inverter<br>(Speed Points)      | Inverter           | · (Infinitely Variable)   | 2 Speed           | Other:                            |

| 3. Trolley                          | Inverter<br>(Speed Points)                           | Inverter (Infin        | itely Variable)    | 2 Speed              | Other:               |  |
|-------------------------------------|--|------------------------|--------------------|----------------------|----------------------|--|
| 4. Bridge                           | Inverter<br>(Speed Points)                           | Inverter (Infin        | itely Variable)    | 2 Speed              | Other:               |  |
| 8D. Inverter Contro                 | ol   |                        |                    |                      |                      |  |
| 1. For inverter con                 | trols with speed points                              | , please indicate the  | number of spee     | d points (steps) for | each function:       |  |
| Main Hoist:                         | Auxiliary Hoist:                                     | Trolley:               | Bridge:            |                      |                      |  |
| 2. Is an hour meter                 | on each function requ                                | ired? (Y/N)            | _                  |                      |                      |  |
| 3. Is a data logger of              | desired to record faults                             | s? (Y/N)               | _                  |                      |                      |  |
| 4. Is electromagner required? (Y/N) | tic interference (EMI) s                             | uppression             | _                  |                      |                      |  |
| 8E. Will indicator li               | ghts (power available,                               | power on, faults.      |                    |                      |                      |  |
|                                     | be mounted on the b                                  | •                      |                    |                      |                      |  |
| 1. If yes, will the lig             | ghts be mounted on th                                | e bridge or the        |                    |                      |                      |  |
|                                     |  |                        |                    |                      |                      |  |
| 9. SAFETY                           |  |                        |                    |                      |                      |  |
| 9A. Capacity Overl                  | oad Protection                                       |                        |                    |                      |                      |  |
| 1. Please indicate v                | what type of overload                                | ockout the crane sha   | ıll be equipped v  | vith:                |                      |  |
|                                     |  |                        |                    |                      |                      |  |
| Electrical                          | Mechanical (No                                       | •                      |                    |                      |                      |  |
|                                     | licate the percentage o                              |                        |                    |                      |                      |  |
|                                     | erload protection shall                              |                        | %                  |                      |                      |  |
| 2. Is an overload w                 | arning system desired                                | ? (Y/N)                |                    |                      |                      |  |
| a. If ves. plea                     | ase indicate the percer                              | stage of full capacity |                    |                      |                      |  |
| • • •                               | erload warning shall be                              | •                      | %                  |                      |                      |  |
|                                     | on interlocks desired?                               |                        | 76                 |                      |                      |  |
| 36. Are anti-comsid                 | on interiocks desired:                               | (1/N)                  |                    |                      |                      |  |
| a. If yes, plea                     | ase provide desired op                               | erational              |                    |                      |                      |  |
|                                     | stics for the anti-collisi                           |                        |                    |                      |                      |  |
|                                     | which warning device                                 | •                      | s that are exclus  | ively pendant oper   | ated may be exempt): |  |
| Horn                                | Bell   | Siren                  | Rotating<br>Beacon | Strob                | e Light Other:       |  |
| 9D. Travel Limitation               | ons  |                        |                    |                      |                      |  |
| 1. Are travel limits                |  |                        |                    |                      |                      |  |
|                                     | dge, Trolley, or Both?                               |                        |                    |                      |                      |  |
| h lfina ela                         | aco provido docinad an                               | orational              |                    |                      |                      |  |
|                                     | ase provide desired op<br>istics for the travel limi |                        |                    |                      |                      |  |
| characteri                          | isucs for the traverilmi                             | 13.                    |                    |                      |                      |  |
| 2. Will the crane cr                | oss over to another ru                               | nway? (Y/N)            |                    |                      |                      |  |

| 3. Will the trolley cross over to another crane bridge/track?   |
|---|
| (Y/N) <u> </u>  |
| 4. Will the crane pass through doors? (Y/N)   |
| 9E. Load Indicating Device (LID)  |
| 1. Is an LID required? (Y/N)  |
| <u> </u>  |
| a. If yes, where will the display be located?   |
| b. If yes, is it required to be separate from the capacity  |
| overload protection? (Y/N)  |
| 9F. Crane Maintenance Walkways and Access   |
| 1. Please indicate below the desired walkway configuration for the crane. Only pick one.                                |
| No Walkways   |
| Full Walkway, Drive Girder Only   |
| Full Walkway, Drive and Idler Girders   |
| Full Walkway, Drive Girder Only & Partial Walkway (Double length of the Trolley), Idler Girder                          |
| Other, Please Explain   |
| 2. Is Trolley access required? (Y/N)  |
| a. If yes, please explain.  |
|   |
|   |
| b. If yes, which fall   |
| protection method is  |
| preferred? (i.e. guardrails,  |
| anchorage points)   |
|   |
| 10.OTHER CRANE CONSIDERATIONS   |
| 10A. Lighting   |
| 1. Are bridge or cab floodlights desired? (Y/N)   |
|   |
| a. If yes, please indicate preferred floodlight type:   |
| 10B. Cranes are typically painted bright yellow. Is special   |
| painting required? (Y/N)  |
| a. If yes, please provide additional details not already  |
| addressed above.  |
| 10C. Who will provide the certified test weights, rigging gear, and riggers for acceptance testing of the crane?        |
| a. If Government is selected above,   |
| a. If Government is selected above,<br>how much lead time is required for   |
| notification of required test   |
| weights/rigging gear, and riggers?  |
| 10D. Indicate below how many hard copies of the operation and maintenance manuals and drawings are required (TYP. 2EA): |
| Number of Hard Copies of Manuals Number of Hard Copies of   |
| Drawings  |
| 10E. Is operational and maintenance training required for this  |
| crane? (Y/N)  |

| a.       | If yes, how many people for operational and how   |                   |   |
|----------|---|-------------------|---|
|          | many for maintenance training?  | Operational:      | People  |
|          |   |                   |   |
|          |   | Maintenance:      | People  |
|          |   |                   |   |
| b.       | If yes, how many hours for operational and how  |                   |   |
|          | many for maintenance training?  | Operational:      | Hours   |
|          |   |                   |   |
| _        | If we and if annihable misses we the speed  | Maintenance:      | Hours   |
| C.       | If yes, and if applicable, please use the space provided to indicate specific required training topics. |                   |   |
|          | (i.e. VFDs, PLCs, BSDS)   |                   |   |
| 10F. Wa  |   |                   |   |
|          | the supported command require an extended   |                   |   |
|          | y period? (Y/N)   |                   |   |
|          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |                   |   |
| a.       | If yes, how long?   |                   |   |
|          | the supported command require rapid warranty  |                   |   |
|          | e? (Y/N)  |                   |   |
|          |   |                   |   |
| a.       | If yes, how long will the rapid response period be,   |                   |   |
|          | and how quickly must the contractor respond?  |                   |   |
| 10G. W   | II drawings be provided related to the building? (Y/N)  |                   |   |
|          |   |                   |   |
| a.       | If yes, in what format will they be provided?   |                   |   |
|          | If you are the discussions he released as next of the   |                   |   |
|          |   |                   |   |
| D.       | If yes, can the drawings be released as part of the   |                   |   |
|          | RFP? (Y/N)  | war to the above  | a questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N)  | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | wer to the above  | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | wer to the above  | e questions or to provide any other information |
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| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |
| 10H. Ple | RFP? (Y/N) case use the space provided below to expand on any ans                                       | swer to the above | e questions or to provide any other information |

## OVER HEAD CRANE CLEARANCE WORKSHEET - UNDER RUNNING SINGLE GIRDER CRANE ONEW OEXISTING - RUNWAY SYSTEM O NEW O EXISTING Centerline of Hooks **Indicate Compass Directions** A (Span - Centerline to Centerline of Runways) A: X min. **PLAN VIEW** C: D: Dotted line indicates lowest point of roof truss, lights, E: max. sprinklers or any obstructions on the top and sides (Measured from the highest point on crane structure) F: max. G: Runway • A (Span - Centerline to Centerline of Runways) • Tread ref. H: l: Hooks in **High Position** J: (smallest) Pendant Controller L: B (Lift) M: **Operating Floor** N: **ELEVATION / VIEW X-X UNDER RUNNING CRANE** - RUNWAY TYPE: - MAXIMUM ALLOWABLE LOAD AT RUNWAY TRACK BEAM SUPPORT POINT, EXCLUDING IMPACT: EXISTING CRANE'S WHEEL SPACING \* For Dimensions "I" and "J" above, if clearance from the sides or highest point of the crane to the closest facility obstruction must be greater than the OSHA minimum clearances provided, please explain below. NOTE(S):









