

NOP-TC POSTING NOTICE

Rev 01 Effective 2026-09-01 CURRENT VERSION Completed in field

What stays on the board. Submit the NOP online.

WORKER INFORMATION

WORKER NAME

-

EMPLOYEE ID

-

POSITION

-

SUPERVISOR

-

PROJECT INFORMATION

PROJECT

-

CLIENT

-

SITE

-

ADDRESS

-

DATE

-

TIME

-

CRANE

CRANE MANUFACTURER

-

MODEL

-

UNIT NUMBER

-

CAPACITY

-

CONFIGURATION

-

BOOM LENGTH

-

RADIUS

-

LOAD CHART REFERENCE

-

INSPECTION

INSPECTED BY

-

TIME

-

ITEM	PASS	FAIL	N/A	COMMENTS
------	------	------	-----	----------

Submitted at least two weeks before the activity				
Project type: Tower Crane				
Binder checklist attached as required				
Supervisor qualifications attached or registered				
Notice posted at the workplace				
Significant changes resubmitted				

COMMENTS

COMMENTS

-

SIGNATURE

PRINTED NAME

-

ROLE

-

DATE

-

PRINTED NAME

-

DATE

-