



HAND CHAIN OPERATED HOIST – PERIODIC INSPECTION

1. Consolidated Nuclear Security, LLC (CNS) ID NO.: _____

2. 2. RATED CAPACITY: _____

	Accept	Reject	N/A
3. <input type="checkbox"/> Welded Link Chain <input type="checkbox"/> Roller Chain			
4. Verify that the hoist is properly marked with (as a minimum): <ul style="list-style-type: none"> • Manufacturer's name • Manufacturer's model or serial number • Rated capacity 			
5. Visually inspect the hoist and remove from service if any of the following conditions are identified:			
a) Maladjustment of functional operating mechanisms that interfere with proper operation or unusual sounds that may indicate a deficiency.			
b) Load chain reeving not in compliance with hoist manufacturer's recommendations.			
c) Evidence of loose bolts, nuts, or rivets.			
d) evidence of worn, corroded, cracked or distorted parts such as load blocks, suspension housing, hand chain wheels, chain attachments, clevises, yokes, suspension bolts, shafts, gears, bearings, pins, rollers, and locking and clamping devices.			
e) Evidence of damage to hook retaining nuts or collars and pins, and welds or rivets used to secure the retaining members.			
f) Evidence of damage or excessive wear of load sprockets, idler sprockets, or hand chain wheel.			
g) Evidence of worn, glazed, or oil contaminated friction discs; worn pawls, cams or ratchet; corroded, stretched, or broken pawl springs in brake mechanism.			
h) Evidence of damage of supporting structure or trolley, if used.			
i) Missing or illegible warning label.			
j) Defective end connections of load chain.			
6. Visually inspect hooks and remove from service if any of the following conditions are identified.			
a) distortion, such as bending or twisting > 10 degrees or manufacturer's recommendation record actual measurement(s):			
b) increased throat opening > 15% or manufacturer's recommendation record actual measurement(s):			
c) wear > 10% or manufacturer's recommendation record actual measurement(s):			
d) Cracks, nicks, gouges, chemical damage, or evidence of heat damage.			
e) Latches on hooks that do not seat properly, do not rotate freely, are missing, or show permanent distortion.			
7. Suspend the hoist and check all functions of the hoist in the unloaded state.			
8. Apply a load of at least 50 lbs. times the number of load supporting parts of chain and check for proper load control.			

9. Comments:

10. Inspector's Signature: _____ Date: _____

INSTRUCTIONS FOR COMPLETING HAND CHAIN OPERATED HOIST PERIODIC INSPECTION

A qualified inspector shall complete the inspection form by filling in the blanks or placing a check mark in the appropriate column for each inspection item. This form provides a record of equipment condition in order to provide a basis for continuing evaluation.

1. Enter the Y-12 CNS equipment identification number for the hand chain operated hoist.
2. Enter the rated capacity of the hoist.
3. Check only the appropriate box for the type of hoist load carrying element. The corresponding inspection form, Page 2 of 2 shall be selected and completed based on the type of load carrying element used by the hoist.
4. Review the manufacturer's markings and confirm that the information on the hoist is legible and complete.
5. Visually inspect the hoist and remove from service if any of the conditions in a) through j) are identified.
6. Visually inspect the suspension hook and the load hook and remove from service if any of the conditions in a) through e) are identified.
7. Suspend the hoist and check all functions while operating in the unloaded state.
8. Apply a load of at least 50 lbs. times the number of load supporting parts of chain and check for proper load control.
9. Use this space to provide comments as appropriate. Use of this section is optional.
10. Review the inspection form, sign and date.