

Aerial Lift Exit Permit

Part I: To be completed by the requester		
Aerial Lift Usage Date(s):	Duration of Permit: (time) From: _____ To: _____	
Location/Building:		
Work To Be Performed:		
Type of Lift Used:		
<input type="checkbox"/> Vehicle Mounted/Bucket Truck	<input type="checkbox"/> Telescopic Boom	<input type="checkbox"/> Trailer Mounted
<input type="checkbox"/> Scissor	<input type="checkbox"/> Articulating Boom	<input type="checkbox"/> Man/Cherry Picker
Lift Requirements: (all must be checked)		
<input type="checkbox"/> Minimum 2 person crew entering the lift		
<input type="checkbox"/> Ground conditions are level and the lift being used is equipped with tires that are appropriate for the ground surface		
<input type="checkbox"/> Lift gates are able to directly face, or be positioned over, the surface (climbing over guardrails is prohibited)		
Fall Protection Requirements: (all must be checked) (consult OHS)		
<input type="checkbox"/> Dual self-retracting lanyards for anyone exiting the lift, depending on the type of fall protection on the working surface		
<input type="checkbox"/> Guardrails or anchor points are available upon exiting the lift (designated work areas may not be sufficient)		
<input type="checkbox"/> Temporary anchor points and guardrails are designed to be used on, or attached to, the working surface		
<input type="checkbox"/> Employees have been trained on the installation, inspection, and use of the selected fall protection measure		
<input type="checkbox"/> Employees have received aerial lift and fall protection training		
Job Hazard Analysis: (must be checked)		
<input type="checkbox"/> An FM JHA has been conducted, and approved by the employees' supervisor and FM-OHS		
Part II: Procedure for exiting aerial lifts		
▪ 1 employee must stay on the lift at all times as acting lift attendant		
▪ Personal fall arrest systems (harness) are required when inside aerial lifts		
▪ 100% tie-off is required when exiting and re-entering aerial lifts, until the employee is protected behind guardrails or attached to an approved anchor point on the working surface		
▪ If temporary anchor points are used, employee must be trained in proper installation and use		
▪ The use of dual self-retractable lanyards is required, to allow employees to move freely to approved anchor points on the working surface		
▪ Designated work areas are not an acceptable means of fall protection when exiting and re-entering aerial lifts		
FOR EMERGENCY RESCUE CALL CHARLOTTESVILLE FIRE DEPARTMENT 911		
Part III: To be completed by requesting crew		
Authorized Employees Exiting the Lift: (print names)		
-	-	
-	-	
Authorized Lift Attendant (does not exit lift): (print name)		
-		
Part IV: To be completed by crew supervisor and FM-OHS		
Supervisor Authorization:		
Signature: _____	Print: _____ Date: _____	
FM-OHS Authorization:		
Signature: _____	Print: _____ Date: _____	

Please scan completed forms and email to fm-ohs@virginia.edu.
Please retain this form for one year for review by FM-Occupational Health and Safety

Facilities Management
Occupational Health and Safety

Job Hazard Analysis (JHA)

General Operation (Task): _____

Supervisor: _____

Location: Indoor Outdoor

Department/Unit: _____

Your Name: _____

PPE required: _____

Reviewed by: _____

Training required: _____

Equipment used: _____

Chemicals used: _____

Date: _____

Activity	Potential Hazards	Procedures/Equipment/Training

Facilities Management
Occupational Health and Safety

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