

HS&E NOC APPLICATION – LIFTING EQUIPMENT

1. GENERAL INFORMATION

Requester Name: _____ Date of Request: _____
 Mobile Number: _____ Email ID: _____
 Company Name: _____ Customer Number: _____
 Application Type: ☐ New ☐ Amendment ☐ Renewal
 NOC Reference No. (Applicable for amendment/renewal only) _____

2. DETAILS OF LIFTING EQUIPMENT

Type of Equipment: ☐ Hoist ☐ Crane ☐ Forklift ☐ Scissor Lift ☐ MEWP ☐ Powered Jack ☐ Stacker
 ☐ Other: _____
 Manufacturer: _____
 Registration /Serial No.: _____ Registration Expiry Date: _____
 Tested By: _____ Test Date: _____ Valid Until: _____
 Safe Working Load (SWL): _____

3. NOTES

- A copy of the duly filled form should be sent to hse@rakez.com. RAKEZ HS&E department reserves the right to request additional information (if necessary).
- Application fees will be applied in accordance with the HSE Service Fees.

4. I CONFIRM THAT I HAVE ENCLOSED THE FOLLOWING DOCUMENTS:

Copy of valid Load Test Certificate of equipment	Operator training certification <i>(Including Alternate Operator if Required)</i>
Copy of equipment registration <i>(if applicable)</i>	Operator licence <i>(applicable for equipment operated in public areas)</i>