TECHNICAL
POLICY AND PROCEDURE NOTICE # 17/88

TO: DISTRIBUTION (See Attached List)

FROM: Jacob Grill, P.E., Assistant Commissioner

DATE: September 29, 1988

SUBJECT: PLUMBINESS AND BOLT TORQUE REPORT FOR CLIMBER CRANES
(FORM # 32).
DEPARTMENT OF BUILDINGS
EXECUTIVE OFFICES
50 HUDSON STREET, NEW YORK, N.Y. 10013
CHARLES M. SMITH, Jr., R.A. Commissioner
312-9100

JACOB GRILL, P.E.
Assistant Commissioner
(212) 312-8301

Form 32
ISSUANCE # 132

TECHNICAL
POLICY AND PROCEDURE NOTICE # 17/88

This form is to be completed and sent or hand delivered to the Cranes and Derricks Division within Forty Eight (48) hours of the initial setup of an Internal or External climber crane, or after plumbing and torquing an External Climber Crane after each jump.

Crane C.D. #___________/C.N. #_________

Crane Location: ____________________________________________________________

   External Climbing Crane: [ ] Internal Climbing Crane: [ ]

   (Check one)

This is to certify that surveyor ___________________ measured the out of plumbness for _____ tower sections of the above crane with a tower (number)
height of _______ feet _______ inches. The lean towards the following directions indicated below was determined to be:

   _______ inches (direction) _______ (manufacturers allowable)

   _______ inches (direction) _______ (manufacturers allowable)

   _______ (Signature of Surveyor)

This is also to certify that the above newly installed _____ sections were (number)
torqued to _______ feet-pound on _______ (Date) under the supervi-
sion of:

   ___________________ (print name) ___________________ (Signature) ___________________ (Title)

   The manufacturer's recommended bolt-torque value is _______ feet-pound.

NAME OF OWNER OR CONTRACTOR (print):
SIGNATURE OF OWNER OR CONTRACTOR: ________________________________
NAME OF COMPANY: __________________________________________________
ADDRESS: ___________________________________________________________

TELEPHONE NUMBER: (_________________)