

## Confirmation of practical training in the use of personnel lifts

The unde	rsigned hereby confirms that:
	(name of course participant)
	/ has completed practical training in the use of personnel lifts in ving classification(s):
Klasse A: Klasse B:	Push – around  Self-propelled lifts
Klasse C:	Truck mounted lifts
Informat	ion about the person signing the confirmation
Name:	
Phone:	
	Check the box if the instructor has a competency certificate from INSTANT (if so it is not necessary to have a copy of the instructor's competency certificate).
	Copy of undersigning's certificate



## **Checklist: practical training personnel lift**

Action Completed?

Check the ground	
Ensure that the user manual is available, and familiarize yourself with it	
Check the validity period of the expert control	
Execute the "daily inspection" of the lift	
Use the outriggers	
Put outrigger pads beneath the outriggers	
Check the stability of the lift	
Start the lift	
Run through all functions of the lift from ground level	
Open and close the gate	
Drive forwards and backwards	
Turn the lift around (if applicable)	
Use the extension (if applicable)	
Brake/stop the lift	
Use the emergency stop function	
Use the emergency lowering function	
Park and turn off the lift	
Use safety equipment when operating the lift	
Operate the lift with acceptable load: have a correct load distribution	
Familiarize yourself with the lift's warning signals	
Load the battery in accordance with the user manual (if applicable)	