



Permitted Equipment Operator's Renewal Form

Operator's Name _____ UM ID# _____

Operator's Uniqname _____ Job Title _____

Department _____ Supervisor _____

Department Contact _____ Department Contact _____
(Name) (Uniqname)

Driver's License: State _____ Expiration Date _____ Restrictions _____

Identify specific type of equipment and location of operation

Type (Cicle all that apply):

<u>Powered Industrial Vehicles:</u>	<u>Aerial Lifts:</u>	<u>Cranes:</u>	<u>Tractor:</u>	<u>Mobile Equipment:</u>
Fork Lift	Self Propelled Elevating	Gantry	Tractor	Telehandler
Utility Vehicle (Kubota/Toolcat)	Manual Propelled Elevating	Overhead		Skid Steer (Bobcat)
Powered Pallet Jacks (Walkie)	Boom Supported Elevating			Front End Loader
	Vehicle Mounted			Backhoe
				Bulldozer

Location (Bldg./Dock Area, Shop #): _____

I certify that the operator listed above has demonstrated safe operation of the indicated equipment.

Renewals only: Check all that apply

- The operator does not require additional training at this time.
- The operator has not been involved in any equipment accidents or near miss incidents.
- The type of equipment and location listed has not changed since the previous permit was issued.
- The operator continues to safely and effectively operate the equipment, including (but not limited to) the following functions:
 - Shows familiarity with the controls, obeys all signs, yields to pedestrians, maneuvers with loads properly, and follows proper procedures at both start and finish.

Evaluator/Supervisor's Name: _____ Date: _____
Print

Signature

Return this evaluation to EHS-PermitEquip@umich.edu