NCI – EQUIPMENT OPERATION AUTHORIZATION

Employee Name:	Authorizing Person:			
Date:	Employee Signature:			
	Job Number:			
PLEASE READ				
Directions: This equipment Authorization must be filled out for everybody on payroll every job, and prior to working with the				

Directions: This equipment Authorization must be filled out for everybody on payroll every job, and prior to working with the equipment noted below. This form shall be completed by an employee in a supervisory role (i.e. Superintendent, Assistant, Foreman, Office Mgr, Trainer, or Safety Representative) once authorization is given the employee shall be made aware and shall sign off that he understands what he was authorized to operate. Upon completion of this form, the office Manager shall keep these forms on the jobsite and disposed once the job is completed.

CHECK EQUIPMENT AUTHORIZED COMMENTS

EQUIPMENT	AUTHORIZED	COMMENTS					
Registered Motor Vehicle		The requirements for operation is a valid driver's license					
		State:	DL#:		DOB:	EXP:	
Commercial Motor Vehicle 10K				•	card, a drivers file.		
		(The drivers file list can be found on the company web site)					
		State:	DL#:		DOB:	EXP:	
Commercial Motor Vehicle 26K		Requirements: CDL drivers license, fed med card, a drivers file. (The drivers file list can be found on the company web site)					
		State:	DL#:		DOB:	EXP:	
Bulldozer							
Excavator							
Hot Saw/Processor							
Forwarder							
Front End Loader							
Track Chipper/Grinder							
Skidder							
ASV							
Wheel Tractor							
Tub Grinder/Chipper							
UTV							
Flail Mower							
Chain Saw							
Knuckle Boom (Log Truck)							
Fork Lift							
Rotary Axe							
List other equipment							