



**NATIONAL COMMISSION FOR THE  
CERTIFICATION OF CRANE OPERATORS (NCCCO)**

**CANDIDATE HANDBOOK**

- **TOWER CRANE OPERATOR**



## BOARD OF DIRECTORS

*This handbook and application packet for the NCCCO Tower Crane Operator Written and Practical Examinations contains the following important documents: a Candidate Written Examination Application form, a Candidate Practical Examination Application form, and a Physical Examination form.*

*Please read this handbook carefully and retain it for reference throughout the certification process.*

**Do not discard this document.**

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Certification of Crane Operators

*NCCCO does not discriminate against any individual because of race, gender, age, creed, disability, or national origin.*



***This NCCCO certification program is accredited by the American National Standards Institute (ANSI) to ISO 17024 (General Requirements for Bodies Operating Systems of Persons) and by the National Commission for Certifying Agencies (NCCA).***



**ANSI Accredited Program  
PERSONNEL CERTIFICATION**  
# 0756  
Mobile, Tower, Overhead, and  
Articulating Crane Operator,  
Signalperson, and Rigger Level I and  
Level II Programs Accredited



Dear NCCCO Candidate:

Welcome to the National Commission for the Certification of Crane Operators (NCCCO) tower crane operator certification program.

NCCCO is a nonprofit organization founded in 1995 to establish a fair and independent evaluation of crane operator knowledge and skills. Key to this industry-led effort has been the development of the NCCCO Written and Practical Examinations, first for mobile crane operators, and subsequently for tower, overhead, and articulating crane operators, riggers, and signalpersons.

This nationally recognized and internationally accredited tower crane operator certification program is the culmination of a year of hard work by experts from the various industries and groups that use cranes, including construction, steel erection, utilities, crane rental, petrochemicals, pulp and paper, and operating engineers. The NCCCO Tower Crane Task Force that determined the content of the exams was made up of experts from all aspects of the crane industry—crane operators, training directors, managers, supervisors, manufacturers—who together represent many thousands of hours of crane-related experience. These volunteers gave freely of their time and expertise with the goal of improving the safety of all whose work brings them into contact with cranes and lifting equipment.

Until recently crane operator certification has been voluntary unless required by local jurisdictions or specific employers. However, in August 2010, the federal Occupational Safety and Health Administration (OSHA) enacted new national standards for cranes and derricks used in construction under 29 CFR 1926 Subpart CC. These new rules require that operators of most cranes above 2,000 lbs. capacity when used in construction need to be either certified by an accredited crane operator testing organization such as NCCCO or qualified through an audited employer program. Section 1926.1427 of the new rule describes crane operator certification/qualification requirements. Option 1, which is anticipated to be the most commonly used, requires operators to be certified by a nationally accredited crane operator testing organization that tests operators through written and practical testing. Obtaining CCO certification from NCCCO meets all the requirements set forth by the new OSHA rule.

To ensure NCCCO examinations are—and remain—valid measurements of crane operators' proficiency, NCCCO teamed the task force's knowledge and experience with the exam development expertise of International Assessment Institute (IAI). Based in Clearwater, Florida, IAI continually analyzes the performance of NCCCO exams and reports to NCCCO's Exam Management Committees, which also guide the development of new examinations. IAI also assists NCCCO in the administration of its CCO Written and Practical Examinations. To be able to provide fair and independent assessments, neither NCCCO nor IAI conducts training, nor do they provide training materials.

***This Candidate Handbook has been prepared to provide you with comprehensive information about the NCCCO Written and Practical Examinations leading to certification for operating tower cranes. NCCCO recognizes the commitment you are about to make and will do everything it can to make your experience a positive and successful one. If, after reading this handbook, there is anything that you do not fully understand or need clarified, please call NCCCO at 703-560-2391 or e-mail [info@nccco.org](mailto:info@nccco.org). NCCCO staff will guide you through any aspect of the program that you would like explained in more detail.***

Thank you for your interest—and good luck with your efforts to become CCO certified!

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# Introduction

## TOWER CRANE OPERATOR

### PROGRAM DESCRIPTION

The National Commission for the Certification of Crane Operators (NCCCO) is an independent, nonprofit organization formed in 1995 to set standards for fairly measuring the knowledge and proficiency required for the safe operation of cranes. NCCCO currently administers a nationwide program of certifications for crane operators and related trades, including riggers and signalpersons.

Based on extensive discussions with representatives from all segments of business and industry who recognize the impact of safety issues, NCCCO has identified the following potential benefits of operator certification:

- Fewer accidents, injuries, and fatalities
- Reduced risk of loss
- Assurance of operator's abilities
- Less property damage
- Improved safety records
- Enhanced public image of crane operators

All candidates are required to pass both the Written and Practical Examination(s) to be certified.

As detailed in this handbook, candidates may take the Practical Examination on the following tower crane types:

- Hammerhead
- Luffing jib
- Self-erecting

The initial certification period is for five years, after which operators are required to recertify. Periodic written examination is necessary to ensure that certificants' knowledge of industry standards, equipment, and safety practices keeps pace with changes in these areas. NCCCO's subject matter experts, working in conjunction with psychometric consultants, reviewed the speed of such change in the industry and researched other comparable certification and licensing programs before determining that this goal could be achieved by setting the examination interval at five years. Little, if any, additional benefits, it is believed, would accrue by more frequent testing. A practical (skills) examination is not required for recertification, as long as the certificant meets specified experience requirements.

### NCCCO EXAMINATION DEVELOPMENT

The first step in the development of an objective test to measure what is required to operate cranes safely was a job task analysis. This study identified the knowledge and

skills necessary for safe crane operations. A representative number of crane operators then validated that the knowledge recommended by the experts was vital to safe operations. The study and survey were then used to generate the test blueprints and content specifications.

Development of the NCCCO *Tower Crane Operator Written Examination* involved a panel of crane operation content experts who worked with the staff of International Assessment Institute to write and review all questions used in the examination. Each examination contains a unique combination of questions from the question bank. These questions are selected for the examination on the basis of the content areas, as defined by the test blueprints.

Similarly, the *Tower Crane Operator Practical Examination* was developed as a fair and objective assessment of the essential skills a crane operator needs to operate tower cranes safely.

These exams were developed over a one-year period by an NCCCO task force made up of experts from all aspects of the crane industry—crane operators, training directors, managers, supervisors, manufacturers—who together represent many thousands of hours of crane-related experience. This task force teamed its knowledge and experience with the exam development expertise of International Assessment Institute (IAI).

IAI guided the task force in establishing key elements of the program, including identifying essential skills, selecting tasks, standardizing test conditions, developing the scoring process, establishing reliability among tests, and creating flexible application and scheduling procedures.

In concert with the NCCCO Tower Crane Task Force, IAI also designed the Practical Examiner Accreditation Program, whereby NCCCO trains and accredits NCCCO-certified crane operators to administer NCCCO Practical Examinations.

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# Certification Policies

## TOWER CRANE OPERATOR

### ELIGIBILITY

To be eligible for certification, candidates must:

- Be at least 18 years of age
- Meet medical requirements
- Comply with NCCCO's Substance Abuse Policy
- Pass a Written Examination
- Pass a Practical Examination
- Comply with the Code of Ethics for Certified Crane Operators

### EXPERIENCE

NCCCO certification exams are designed for operators who are trained and who currently work in crane operation.

### PHYSICAL EVALUATION

Certified crane operators must continue to meet ASME B30.3 physical requirements throughout their certification period, and they must attest to their agreement to this requirement in their application.

Means of compliance with ASME Physical Requirements include, but are not limited to, the following:

- NCCCO Physical Examination Form—valid for three years
- A current Department of Transportation (DOT) Medical Examiner's Certificate—valid for two years

### NCCCO WRITTEN EXAMINATIONS

The Written Examination consists of a single examination in tower crane operation. This examination has 55 multiple-choice questions. Candidates are allowed 60 minutes to complete the Tower Crane Operator Written Examination. Candidates meeting the eligibility requirements may take the Written and Practical in either order.

### NCCCO PRACTICAL EXAMINATIONS

The Practical Examination demonstrates crane operation proficiency and may be taken on any one of the following tower crane types:

- Hammerhead
- Luffing jib
- Self-erecting

### NCCCO CERTIFICATION TIME FRAMES

Candidates must pass both Written and Practical Examinations to be certified for a five-year period. The Written and Practical Exams may be taken in either order. Candidates have 12 months from the time they pass their first Written or Practical Exam for each crane type in which to pass the corresponding (Written or Practical) Exam.

Any tests passed within a 12-month period count towards certification. For example, a candidate who fails the Tower Crane Operator Written Exam in January 2011 but passes the Tower Crane Operator Practical Exam in June 2011 has until the end of June 2012 to retake (and pass) the Tower Crane Operator Written Exam.

### RECERTIFICATION REQUIREMENTS

NCCCO certification is valid for five years. *Recertification candidates must complete all of their recertification requirements during the 12 months prior to their certification's expiration date.* This includes:

- Passing the Recertification Written Examination
- Continuing to meet medical requirements
- Compliance with NCCCO's Substance Abuse Policy
- Compliance with the Code of Ethics for Certified Crane Operators

Candidates who can attest to at least 1,000 hours crane-related experience during their period of certification do not need to take the Practical Exam to recertify. *Crane-related experience* is defined as: operating, maintaining, inspecting, or training on cranes.

Candidates who do need to take the Practical Exam for any reason, however, must do so before their certification expires. *There is no grace period after their certification's expiration date.* Candidates whose certification has lapsed must take the full Written and Practical Examinations over to be certified again.

The Tower Crane Operator Recertification Examination consists of 30 multiple-choice questions with a time limit of 45 minutes.

Recertification candidates are allowed two attempts to pass the Tower Crane Operator Recertification Written Exam before their certification expires. Candidates who are unsuccessful after two attempts must take and pass the regular Tower Crane Operator Written Exam.

Recertification candidates may take their Recertification Written Examination up to one year prior to their certi-

fication's date of expiration. Regardless of the date of the recertification examination within that one-year period, the new five-year certification period begins from the date of expiration of the candidate's initial certification.

[Note: Candidates who recertify more than 12 months prior to their expiration date will have their new certification period begin immediately, not from the end of their current certification period.]

Recertification exams are available at regularly scheduled test administrations. Candidates wishing to recertify should contact the Test Site Coordinator who set up the initial certification. Operators whose employment circumstances have changed should ask their new employer to schedule a test administration. Candidates may also locate open NCCCO Written Exam Test Sites at [www.nccco.org/general/testsites.html](http://www.nccco.org/general/testsites.html).

## **CODE OF ETHICS FOR CERTIFIED CRANE OPERATORS**

Certified crane operators must comply with the Code of Ethics for Certified Crane Operators during their certification, as defined below:

*As an NCCCO-certified crane operator, I will perform my work in a manner:*

- i. *Free of bias with regard to religion, ethnicity, gender, age, national origin, and disability*
- ii. *So as to place the safety and welfare of workers associated with the lifting operation above all other considerations*
- iii. *So as to protect nearby general public property and the environment*

*In addition, I will:*

- iv. *Make my management aware if I have safety concerns relating to the lifting operations that I am performing*
- v. *Not knowingly violate safety-related regulations, warnings, or instructions set forth by OSHA, recognized safety standards, or the crane manufacturer*
- vi. *Not misrepresent or knowingly deceive others concerning my experience or the capabilities of myself or the crane I am operating*
- vii. *Not misrepresent or misuse my certification card or the NCCCO logo, which are the property of NCCCO; I understand that I must return the card to NCCCO immediately if requested to do so*

## **DISCIPLINARY POLICY**

NCCCO'S Ethics and Discipline Committee is responsible for establishing and implementing standards of conduct, such as ethical standards and policies and procedures for disciplinary action. Grounds for revocation of certification status shall include, but not be limited to, the following:

1. Period of certification exceeded without renewal
2. Evidence of falsification of any information on any documents submitted to NCCCO or its agents
3. Evidence of non-compliance with NCCCO's Substance Abuse Policy
4. Evidence of culpability in an accident during certification period
5. Evidence of non-compliance with ASME B30 medical requirements
6. Evidence of non-compliance with the Code of Ethics

NCCCO has established policies and procedures to address alleged violations of the Code of Ethics fairly and consistently. The complaints procedures have been designed to ensure that only valid and actionable complaints are investigated and considered. These procedures also ensure that all parties involved in the complaint have an opportunity to document circumstances warranting the complaint and to respond to the complaint.

NCCCO has a two-tier process to ensure that issues regarding the practice and conduct of certified crane operators are fairly and reasonably investigated and determined, and that the public is protected against unprofessional and unethical conduct by certificants.

Complaints against certificants are initially investigated by NCCCO's Manager of Test Integrity, who reports to NCCCO's Ethics and Discipline Committee. If the complaint is considered actionable, the Ethics and Discipline Committee informs both the certificant and the complainant of the official opening of the investigation. Following the investigation of the complaint, the Ethics and Discipline Committee informs the certificant and the complainant of its decision.

If a sanction is imposed, the certificant may request an appeal of the decision to the NCCCO Board of Directors. Appeals should be addressed to:

Executive Director  
National Commission for the Certification of Crane Operators (NCCCO)  
2750 Prosperity Avenue, Suite 505  
Fairfax, VA 22031

The decision of the NCCCO Board of Directors is final.

## **SUBSTANCE ABUSE POLICY**

It is the policy of NCCCO that crane operators shall not use any prescribed or over-the-counter substances that would impair their ability to operate cranes safely. This includes illegal drugs, controlled substances (including trace amounts), look-alike drugs, designer drugs, or any other substance which may have an effect on the human body of being a narcotic, depressant, stimulant, or hallucinogen.

An exception to this rule is that an operator may use such a substance or drug if it is prescribed by a licensed medical practitioner who is familiar with the operator's medical history and all assigned duties and who has advised the operator that the prescribed substance or drug will not adversely affect the operator's ability to operate a tower crane safely.

NCCCO-certified crane operators shall comply with the substance abuse testing provisions of ASME B30.3. It is a condition of certification that crane operators certified by NCCCO attest to their compliance with this Substance Abuse Policy. Non-compliance with this policy automatically revokes a candidate's certification status.

## **CERTIFICATION CARDS**

Certified operators receive a laminated photo ID card at no cost when they certify for the first time and when they complete the requirements for recertification.

A certified operator may only hold one certification card at a time. If a candidate has previously certified in mobile and/or overhead cranes and subsequently becomes certified in tower cranes, he/she may request an updated certification card. Updated or replacement cards may be obtained from International Assessment Institute at a cost of \$25.

## **CHANGE OF ADDRESS**

Certificants who change their address must notify NCCCO as soon as possible. Failure to do so may cause important updates on the NCCCO program to be missed that could affect a certificant's stature.

Changes of address should be sent to International Assessment Institute (IAI). They must be in writing but can be sent via letter or fax. A form for this purpose is provided on page 29 of this handbook.

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# Written Examination Process

## TOWER CRANE OPERATOR

### APPLICATION PROCESS TO TAKE THE WRITTEN EXAMINATION

Tower Crane Operator written exams and recertification exams may be taken either in a traditional pencil-and-paper format at an approved NCCCO written exam test site or as a computer-based test at more than 250 PSI/LaserGrade test centers across the country. The content of both test formats is identical.

#### Pencil-and-Paper Option (Traditional Test Site)

Candidates desiring to sit for a pencil-and-paper written exam(s) should visit [nccco.org](http://nccco.org) to see a schedule of upcoming Test Dates and Locations and then submit a completed Candidate Application form with the appropriate documentation to NCCCO's testing partner IAI. Applications are due two weeks prior to the scheduled examination date. Application deadline examples are shown on page 8. Information about the specific locations of the Test Sites will be available approximately four weeks prior to the examination. Candidates eligible to sit for the examination will receive an admission letter approximately one week before the scheduled test administration date.

#### Computer-Based Testing (CBT) Option

Candidates desiring to take their written exam(s) using the CBT option should visit [nccco.org](http://nccco.org) and click on the Computer-Based Testing link under Test Dates and Locations. The CBT Frequently Asked Questions page includes links to a directory of PSI/LaserGrade locations and an online application form. After the candidate completes and submits the online application, IAI will send an authorization email within 48 hours. After receiving the authorization email, **wait 24 hours**. Then call the number provided in the email to schedule the test(s) with LaserGrade; LaserGrade will send an appointment confirmation email within 24 hours. Go to the selected test center at the scheduled date and time. Bring a valid photo ID and the authorization email, but be aware that materials such as cell phones, calculators, hats, coats, and bags are not permitted in the test room. Test results are available immediately.

#### Candidates Requesting Testing Accommodations

Arrangements for persons with disabilities will be provided upon request, in conformance with the Americans with Disabilities Act (ADA).

Professional documentation in support of a request for accommodations must be submitted to NCCCO no later

than four weeks prior to the scheduled test date. For further information about Testing Accommodations, see the complete NCCCO Testing Accommodations Policy at: <http://www.nccco.org/general/accommodations.html>.

### SUBMISSION OF APPLICATION

The Candidate Application and Physical Examination forms are located at the back of this handbook. The Candidate Application with the appropriate fees, as well as any correspondence and request for information concerning the administration of NCCCO examinations, should be sent to:

International Assessment Institute  
Attention: NCCCO Testing  
600 Cleveland Street, Suite 900  
Clearwater, Florida 33755  
Phone: 727-449-8525/Fax: 727-461-2746

Check the application carefully to ensure that all information is accurate and complete. In addition to the completed application, make sure to enclose the appropriate fees.

Candidates may also register for either CBT or paper-and-pencil exams and pay online at: [www.iaiaexam.com](http://www.iaiaexam.com).

Follow the directions carefully when filling in the required information. Incomplete applications, incorrect payment, and/or inaccurate documentation will delay the processing and incur additional fees. This could result in the candidate *NOT* being able to sit for the examination(s).

#### Deadlines

***Please note that all deadlines are UPON RECEIPT deadlines. Candidates and the Test Site Coordinator are solely responsible for making sure that completed and accurate applications reach International Assessment Institute by the stated deadline.***

### EXAMINATION FEES

The appropriate fee must be enclosed with the completed application. Checks and money orders payable to *International Assessment Institute* are preferred. Candidates may also pay by credit card (VISA, MasterCard, or American Express). Do not send cash. Please do not staple checks or money orders to the application form, but do include payment in the envelope with all the other application materials.

*All returned checks are subject to a \$30 fee.*

### Written Examination Fees:

- Tower Crane Written Exam \$165
- Tower Crane Written Exam \$50  
(For current NCCCO-certified mobile crane operators, or new candidates who are registering for mobile crane operator exams at same time)
- Updated/replacement certification card \$25

The same fees apply for retest examinations.

### Other Fees:

An additional \$50 late fee will be charged if an application is late.

An additional \$25 fee will be charged if a candidate:

- Wishes to reschedule without a valid reason (see Emergency Cancellations or Withdrawals)
- Needs a duplicate/replacement certification card or score report

An additional \$30 fee will be charged if:

- An application form is incomplete
- Full payment is not submitted
- A credit card cannot be processed for any reason
- A check is returned
- A candidate wants to add to or change the exams he/she plans to take after scheduling has been completed (in addition to the exam fee)

All application materials must be received at International Assessment Institute's office according to the sample test schedule outlined below.

Applications received after the main application deadline, but at least four business days prior to the exam administration deadline, can be accepted for an additional \$50 late fee. For example, for a test administration on a Saturday, late applications that arrive at IAI's testing office by 5 p.m. (ET) on the Monday evening prior will be accepted. Candidate applications that arrive after that time cannot be accepted.

*Walk-in candidates cannot be accepted under any circumstances.*

### RESCHEDULING, CANCELLATIONS, AND WITHDRAWALS

Should a candidate be unable to sit for the examination, International Assessment Institute **must** receive notification in writing no later than seven business days prior to the scheduled examination date. Candidate fees will be

held up to one year. When the candidate reschedules, he/she will need to pay an additional \$25 rescheduling fee.

Candidates who wish to reschedule their NCCCO Written Examination(s) **must** notify International Assessment Institute and submit the necessary documentation and fees to International Assessment Institute by the deadline for the rescheduled test date.

***Candidates withdrawing or canceling after the deadline or not sitting for the examination will forfeit all application fees and will NOT receive a refund.***

### Emergency Cancellations or Withdrawals

ONLY the following situations will be accepted as grounds for emergency cancellations or withdrawals:

- ***Called to work***—supporting documentation required: *letter from employer*
- ***Candidate illness***—supporting documentation required: *doctor's note*
- ***Family death***—supporting documentation required: *death certificate or obituary notice*

Requests for medical and personal emergency withdrawals are handled by International Assessment Institute upon submission of a letter describing the situation. Full name, address, and social security number must be included along with the scheduled test date, site number, and supporting documentation indicated above.

***International Assessment Institute MUST receive written notification within seven business days after the scheduled examination date or all application fees will be forfeited.*** Candidates will, however, be allowed to reschedule for a future examination administration.

***Candidates will NOT receive a refund if they decide they no longer wish to take the test.***

### TEST ADMINISTRATION SCHEDULE FOR NCCCO EXAMINATIONS

NCCCO Written Examinations are available for administration on demand with at least four weeks' notice.



## APPLICATION DEADLINES

Tests can be administered at any time as long as the application deadlines are met. Sample deadlines shown are for a test date of January 29.

		January						
		S	M	T	W	Th	F	Sa
Written Test Site Application Request Form due four weeks prior to test date.	●	→	1	2	3	4	5	6
Candidate Applications due two weeks prior to test.	●	→	15	16	17	18	19	20
Test Day	●	→	29	30	31			

## ADMISSION LETTERS

Approximately one week before the scheduled test date, registered and eligible candidates approved to take the NCCCO Written Examinations will receive an admission letter by mail. The admission letter contains information regarding the test center address, the reporting time, the examination(s) the candidate is registered for, and the materials candidates need to bring with them on the day of the administration. This admission letter must be presented at the Test Site to gain admittance to the examination(s).

No candidate will be allowed to sit for the examination unless he/she presents an admission letter valid for the specific test date.

## TEST SITE INFORMATION

### Identification at the Test Site

In addition to an admission letter valid for the specific test date, candidates must bring valid photo identification to the Test Site on the day of the administration. Candidates are required to show their ID and sign the Test Site roster upon entry to the testing area.

Acceptable forms of photo identification are:

- Passport
- Government-issued driver's license
- Work identification

**NOTE: Candidates without appropriate identification documents will NOT be admitted to take NCCCO Examination(s).**

## Materials to Bring to the Test Site

Each candidate must bring the following to the Test Site:

- Valid photo identification
- Admission letter for the specific test date
- Two sharpened #2 pencils (to complete the examination answer sheet)
- A good eraser

**NOTE: No books, scratch paper, calculators, beepers, cellular phones, or other materials will be allowed in the examination room.**

## Test Security

For the purposes of test security, candidates who sit for NCCCO examination(s) acknowledge that they understand the following:

- The examination is the exclusive property of NCCCO.
- The examination and the questions contained therein are protected by federal copyright law. No part of the examination(s) may be copied or reproduced in part or whole by any means whatsoever, including memorization.
- Theft or attempted theft of an examination booklet or any of its pages is punishable as a felony.
- Candidate participation in any irregularity occurring during the examination, such as giving or obtaining unauthorized information or aid, as evidenced by an observation or subsequent statistical analysis, may be sufficient cause to terminate participation, invalidate the results of the examination, or other appropriate remedy.
- Candidates verify that they have successfully met the physical/medical requirements and are eligible to take this examination. If at any time it is confirmed that a candidate has not met all the requirements, the candidate will no longer be eligible for certification.
- A candidate's signature on the answer sheet for the administration of the examination confirms that the candidate has read and understands the above statements.

## Candidate Question Comment Forms

Candidates can comment on the examination(s) as a whole or on specific items within an examination by writing the comments on the Candidate Question Comment Form. These comments should be accompanied by the candidate's name (which is optional), the specific examination and question referred to, the site code, and the test

date. Examination comments are reviewed by NCCCO content experts on a regular basis.

**NOTE: Only comments completed on the Candidate Question Comment Form at the Test Site will be considered for review.**

## TEST SCORING INFORMATION

### Test Scoring

NCCCO Written Examinations are criterion-referenced examinations; i.e., the passing score is set beforehand, and candidate performance on the examination is not compared to the performance of others taking the examination. In a criterion-referenced examination, a candidate must obtain a score equal to or higher than a predetermined passing score to pass the test. The passing score represents an absolute standard that is determined by a panel of NCCCO content experts using a psychometrically accepted standard-setting methodology.

### Score Reporting

NCCCO Written Examinations are electronically scored by International Assessment Institute. For this reason, it is important to complete the answer sheet according to the instructions provided by the Chief Examiner on the day of the exam. Candidates will receive credit only for answers recorded on the scannable answer sheet. **Answers marked in the test booklet(s) will NOT be counted toward a candidate's score.**

All candidates will receive a score report of their performance. Examination results are mailed to candidates approximately 12 business days after the examination administration.

In reporting the examination results to candidates, statistical procedures are used to convert raw scores (i.e., the number of test questions answered correctly) to scaled scores, which are set for all administrations of the examination(s). The scaled score is not a number-answered-correctly score.

Candidate results are reported on a scale ranging from zero to 100 points, with a score of **70** representing the minimum passing score for this test. Written exam score reports include a strength and weakness report by content domain.

**Candidate scores cannot be given over the telephone.**

### Hand Score Requests

Candidates not passing the examination(s) may request from International Assessment Institute a hand scoring of their answer sheets, provided the request is made in

writing within three months of the test date; such requests must be accompanied by a processing fee of \$25 for one test score and \$50 for two or more failed test scores per test administration.

Hand scoring requests should be mailed to:

International Assessment Institute  
— Attention: NCCCO Testing  
600 Cleveland Street, Suite 900  
Clearwater, Florida 33755  
Phone: (727) 449-8525  
Fax (727) 461-2746

In the event that the hand scoring of a failing candidate's answer sheet results in a passing score, the hand-scoring fee will be refunded in full.

## RETAKE THE EXAMINATION(S)

Candidates who fail an examination(s) may retake the examination(s) by reapplying and paying all corresponding fees.

## INFORMATION RELEASE POLICY

NCCCO releases information pertaining to individuals who have successfully passed one or more NCCCO examinations according to its Information Release Policy (see page 35).





# Written Examination Outline

## TOWER CRANE OPERATOR

The Tower Crane Written Examination tests the following knowledge areas relating to the operation of tower cranes.

### Domain 1: Site

- Approximately 10% of test

### Domain 2: Erection, Climbing, and Dismantling

- Approximately 25% of test

### Domain 3: Operations

- Approximately 50% of test

### Domain 4: Technical Knowledge

- Approximately 15% of test

## DOMAIN 1: SITE

*Approximately 10% of test*

1. Know how to assess suitability of the supporting surface.\*
2. Know how to determine if there is adequate room for outriggers and tail swing.\*
3. Know how to locate and identify site hazards and restrictions such as electric power lines, air-rights, or other hazardous systems and public access areas.
4. Be familiar with basic requirements for power sources, fusing, disconnects, lightning protection, and grounding.
5. Be familiar with the necessity to protect the crane's foundation.

*\* 1 and 2 refer to self-erecting tower cranes only*

## DOMAIN 2: ERECTION, CLIMBING, AND DISMANTLING

*Approximately 25% of test*

1. Know proper erection, climbing, and dismantling procedures specified by the manufacturer in the operator's manual.
2. Know general notes and warnings to be applied during climbing procedures.
3. Know the maximum allowable wind speeds during erection, climbing, dismantling, and operation.
4. Understand the proper procedures for bolting and/or pinning connections.
5. Understand the maximum freestanding height allowed.
6. Understand the proper counterweight configurations and/or central ballast requirements.

7. Understand the proper crane configuration.
8. Be familiar with standard minimum and maximum tie-in spacing and maximum tower height above tie-ins.
9. Be familiar with proper installation of internal climbing collars, support beams, wedges, and climbing apparatus.
10. Be familiar with proper installation of top climbing units and tie-in collars, struts, and lower braces.
11. Know proper position of top climbing unit after climbing procedures in accordance with manufacturer's specifications.
12. Be familiar with proper travel rail installation and maintenance.

## DOMAIN 3: OPERATIONS

*Approximately 50% of test*

1. Know how to inspect the crane for proper condition and complete required records.
2. Know how and when to communicate with management, crew, and signalperson.
3. Know standard method hand signals as specified by OSHA.
4. Know how to shut down and secure the crane properly when leaving it unattended.
5. Know the manufacturer's recommendations for operating in various weather conditions.
6. Know how to verify the weight of the load and the rigging.
7. Understand basic load rigging procedures.
8. Know how to perform basic maintenance.
9. Know the crane operator responsibilities contained in ASME B30.3 and specified by OSHA.
10. Know how to use operator aids and limiting devices.
11. Know the proper procedures for operating safely under special conditions—e.g., traveling with suspended loads; approaching two blocking; operating near electric power lines; lifting loads from beneath the surface of the water; handling loads out of the operator's vision ("in the blind"); and using suspended personnel platforms.
12. Know the proper procedures for load control during the use of handheld tag lines.

13. Know emergency response procedures—e.g., fire control, electric power line contact, and control malfunction.
14. Understand federal, state, and local regulations and ASME B30.3 regulations pertaining to the operation of the crane.
15. Know how to review planned crane operations and requirements with site supervision.
16. Understand tower crane load charts.

#### **DOMAIN 4: TECHNICAL KNOWLEDGE**

##### *Approximately 15% of test*

1. Understand the function, limitations, and characteristics of the crane.
2. Know the basic maintenance, inspection, and replacement criteria for tower crane wire ropes.
3. Know basic tower crane nomenclature.
4. Understand basic machine power flow systems—e.g., mechanical, electrical, hydraulic, combination.
5. Understand boom, jib, counter jib, and counterweight configurations.
6. Know the out-of-plumb tolerance for the tower crane
7. Have a basic understanding of metric units and U.S. customary units.
8. Understand basic safety procedures—e.g., lock out, tag out, fall protection.



# Sample Questions

## TOWER CRANE OPERATOR

The following are sample test questions typical of the style and content of the questions used in NCCCO Written Examinations.

1. An overhead power line is ALWAYS considered to be:
  - a. Energized until the power company has verified that it is not energized
  - b. Safe as long as the load, hoist rope, and structure are kept at least ten feet away
  - c. De-energized if there is not power on the job site
  - d. De-energized if the line has a safety cover over it.
2. Maintenance personnel are permitted to operate the crane only when:
  - a. It is a light load
  - b. The operator is not available
  - c. Performing their duties
  - d. Winds are less than 20 mph
3. According to ASME B30.3, who should be present when climbing or telescoping operations take place?
  - a. Supervisor
  - b. Field tech
  - c. Operator
  - d. Manufacturer's representative
4. According to OSHA 1926.1431, when a wire rope bridle is used to connect the personnel platform to the load line, each bridle leg shall be connected to a:
  - a. Master link
  - b. Cable clamp
  - c. Pelican hook
  - d. Becket pin
5. According to OSHA 1926.1435, what shall be provided at both ends of travel of the trolley?
  - a. Buffers
  - b. Warning lights
  - c. Paint marks
  - d. Trolley basket
6. All controls shall be tested by the operator:
  - a. Every 100 hours of running time
  - b. At the start of a new shift
  - c. After any critical lift
  - d. After erection only

B	6
A	5
A	4
C	3
C	2
A	1
Answer #	Question #



## Reference List

### TOWER CRANE OPERATOR

The following reference materials are used by NCCCO's Examination Committee to verify the accuracy of NCCCO test questions.

Candidates are strongly advised to become familiar with manufacturers' load charts in preparing for the NCCCO certification examinations. (Prices shown current at press time.)

**ASME, B30.3, 2009** **\$52.00**  
**TOWER CRANES**

And successive addenda

*Order by Internet:* <http://catalog.asme.org/>

*Order by Mail:*

American Society of Mechanical Engineers  
22 Law Drive, Box 2900  
Fairfield, NJ 07007  
ph: 800-843-2763; fax: 201-882-1717

*Payments accepted:* Check, VISA, MasterCard, American Express, Discover, Diner's Club

**OCCUPATIONAL SAFETY AND HEALTH  
ADMINISTRATION, U.S. DEPARTMENT OF LABOR  
CODE OF FEDERAL REGULATIONS, PART 1926  
SUBPART CC—CRANES AND DERRICKS IN  
CONSTRUCTION; SUBPART R—STEEL ERECTION;  
AND PART 1926.251—RIGGING EQUIPMENT**

*Order by Internet:* <http://www.osha.gov/>

*Order by Mail:*

NCCCO  
2750 Prosperity Avenue, Suite 505  
Fairfax, VA 22031-4312  
ph: 703-560-2391; fax: 703-560-2392  
email: [info@nccco.org](mailto:info@nccco.org)

**NCCCO TOWER CRANE REFERENCE** **\$29.50**  
**MANUAL**

*Order by Internet:* <http://www.nccco.org/store/>

**IPT'S CRANE AND RIGGING TRAINING** **\$34.00**  
**MANUAL (2005)** + S&H \$10.00

*Order by Internet:* <http://www.iptbooks.com/>

*Order by Mail:*

IPT Publishing and Training Ltd.  
P.O. Box 9590  
Edmonton, Alberta, T6E 5X2 Canada  
ph: 780-962-4548; fax: 780-962-4819

*Payments accepted:* VISA, MasterCard, American Express, check, money order

**BOB'S RIGGING & CRANE HANDBOOK**  
**Desk size: \$24.00**  
**Pocket Size: \$13.00**

*Order by Internet:* <http://www.donpellow.com/>

*Order by Mail:*

Pellow Engineering Services  
406 West 50th South  
Kansas City, MO 64112  
ph: 877-473-5569; fax: 816-931-4113

*Payments accepted:* VISA, MasterCard, check, money order



# Practical Examination Process

## TOWER CRANE OPERATOR

### SKILLS TESTED

The NCCCO Tower Crane Operator Practical Exam can be taken on any one of the following types:

- Hammerhead
- Luffing jib
- Self-erecting

The Practical Examination is comprised of three main tasks that increase progressively in the skill level tested. Skills tested are: trolley travel, hoisting, swinging, and combination (multifunction) operations. Crane operation with load and without load is required.

NCCCO provides a Test Site Layout (CAD) for the Practical Examination for each type of tower crane to ensure the examination remains standardized for all candidates, wherever and whenever they may test.

### SCHEDULING A TEST

Candidates for the Practical Examination should contact their Test Site Coordinator to determine the date of the next scheduled Practical Exam. Alternatively, candidates may visit NCCCO's website at [www.nccco.org](http://www.nccco.org) for a listing of upcoming open practical Test Sites. **Candidates must bring their completed Practical Exam Candidate Application Forms with them to their scheduled examination, along with any required supporting materials.**

### TEST DAY

Candidates must report to the Test Site at the scheduled time. **All candidates shall comply with Test Site requirements concerning personal protective equipment (PPE), which at a minimum shall meet OSHA requirements.**

### PRACTICAL SCORING

Candidate performance on the Practical Examination is recorded by Practical Examiners accredited by NCCCO. Examiner requirements include meeting NCCCO requirements for certification, passing the Written and Practical Exams, and successfully completing an accreditation workshop.

The testing procedure has been developed to provide the highest degree of standardization and reliability. The Examiner's task is primarily to record the performance of the candidate.

Candidates can lose points either through operational errors or exceeding established optimum time limits. The scoring of candidates' performance is done off site at the facilities of International Assessment Institute.

### PRACTICAL SCORE REPORTING

All candidates receive score reports of their performance. Examination results are mailed to candidates approximately twelve business days after the receipt of Practical Examination score sheets by International Assessment Institute.

Please note that while Practical Examiners are encouraged to expedite score sheets after each test administration, they may batch score sheets from several test administrations over a number of days. This means that candidates may receive their score reports from IAI more than three weeks after their test administration.

Both the Practical Examination and the scoring system have been validated by NCCCO's pilot testing program and verified by International Assessment Institute. A score of **70** represents the minimum passing score for the Tower Crane Operator Practical Examination.

### PRACTICAL EXAMINATION FEES

The appropriate fee must be submitted with the candidate's application through the Test Site Coordinator.

- Practical Examination candidate fee: \$60
- Current NCCCO-certified Mobile Crane Operators, or new candidates registering for the Mobile Crane Exams at the same time: \$50

The same fees apply for retest examinations.

### PRACTICAL HAND SCORE REQUESTS

Candidates not passing the examination(s) may request from International Assessment Institute hand scoring of their answer sheet(s), provided the request is made in writing within three months of the test date. Hand scored practical exam reports include details of a candidate's performance on each task. Requests must be accompanied by a processing fee of \$25 for each test requested. Requests should be mailed to:

International Assessment Institute  
— Attention: NCCCO Testing  
600 Cleveland Street, Suite 900  
Clearwater, Florida 33755  
Phone: (727) 449-8525 — Fax (727) 461-2746

In the event that the hand scoring of a failing candidate's answer sheet results in a passing score, the hand-scoring fee will be refunded in full.

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# Practical Examination Outline

## TOWER CRANE OPERATOR

The following is an outline of the practical testing procedure, as provided to candidates at the time of testing.

### CANDIDATE INFORMATION AND INSTRUCTIONS

The following sections describe the specific tasks that you will be performing when taking the Practical Examination. It is important that you understand these instructions. If there is anything you do not understand, please request clarification from the Examiner.

### TASKS

The three tasks are:

- **Task 1: Place Load Hook and Chain in Stop Circle**
- **Task 2: Place Test Weight in Load Circle**
- **Task 3: Negotiate Zigzag Corridor with Load**

There is also a Pre-Test Briefing, a Pre-Test Familiarization Period, and a Pre-Task Familiarization Period (prior to the Load Circle task) with a load. You will be required to complete all phases of the test in sequence.

The Test Site Coordinator is responsible for setting the testing schedule. If you are familiar with the operation of the test crane, you may elect to test first to allow other candidates time to review the operator's manuals and load charts. Otherwise, selection shall be by random drawing or by assignment of the Test Site Coordinator.

During the Practical Examination, you are under the direction of the Examiner and must follow the Examiner's directions at all times.

Once you have completed all of the tests you are taking, you must leave the testing area. Only personnel involved in the administration of the test are allowed in the test area.

### TIME LIMITS

An *optimum* time limit has been set for all tasks and is stated as part of the task descriptions. If the task is completed within this time period, you receive no time penalty.

Once you exceed this time limit, you will lose points on a gradual basis. If you take one and a half times as long as the optimum time, you will have lost all the points allotted to that particular task. At two times the optimum time the Examiner may end the task and move on to the next task.

### PRE-TEST BRIEFING

While you are waiting to take your test, you will have sufficient time to read this description of the tasks to be performed and review the operator's manual and load chart for the crane you will operate. In addition, you will be informed of the make and model of the crane, the load hook height, jib length, and the weight of the test load. You will also watch a short video showing all the tasks you will be required to perform during the examination.

Note that:

- The crane's LMI system (if the crane is so equipped) has been correctly programmed and will not interfere with the proper operation of the crane.
- The crane has been set up and leveled.
- None of the target points have been placed at a radius that exceeds the crane's rated capacity.

### CIRCUMVENTING THE COURSE

*Circumventing the course* on the NCCCO Tower Crane Operator Practical Exam is defined as when the load:

- Leaves the Zigzag Corridor and passes more than one pole without touching them before re-entering the corridor
- Leapfrogs from one leg of the Zigzag Corridor to another with the chain off the ground
- Passes more than four poles consecutively with the chain off the ground, inside or outside of the corridor

All points for a task are lost if a circumvention occurs. The Examiner has the authority to stop the task at any time if he/she feels that the candidate is attempting to circumvent any task.

### UNSAFE ACT

If, at any time during the Pre-Test Familiarization Period or during the test, you commit an unsafe act, you will be disqualified from continuing with the test. *Unsafe acts* include but are not limited to the following:

- Dropping the load hook or Test Weight (on ground)
- Uncontrolled or reckless operation
- Failure to respond to a *stop* signal
- Contacting an obstruction with the crane or Test Weight
- Load touching any part of the candidate's body
- Touching the crane with load hook or load
- Any action that in the judgment of the Examiner could endanger personnel or equipment at the Test Site



The Examiner has the authority to stop the test at any time for reasons of safety. Please ask the Examiner if you have questions.

If you are disqualified due to an unsafe act, your case will be reviewed by IAI and NCCCO, and you will be notified as to your eligibility for rescheduling your Practical Exam.

### **CANDIDATE ID AND SIGNATURE**

Prior to beginning the examination, the Examiner will ask you for a photo identification, such as a driver's license.

The Examiner will ask if you have read the Candidate Information and Instructions and will answer any questions you may have. He/she will review with you the weather conditions and ask you to sign indicating that you understand the instructions for the test and that you agree with the Examiner's assessment of the weather conditions.

### **WEATHER CONDITIONS/EQUIPMENT PROBLEMS**

The Examiner will use an anemometer to check the wind speed and then will record the weather conditions on the score sheet.

The Examiner has the responsibility to determine if weather conditions or equipment problems are such that a test needs to be suspended. If the test is interrupted due to weather conditions or equipment problems, the procedure for restarting is as follows:

- You will resume the test at the beginning of the task you were performing at the time of the interruption, except for Task 3, when you will go back to the beginning of either Task 3a or 3b, as appropriate.
- You will be entitled to a Pre-Test or Pre-Task Familiarization Period before resuming the test.
- If you resume the test on a different machine, you will have the option of starting the entire test over from the beginning.
- If the testing is delayed to a different day, the test must be restarted from the beginning.

### **PRE-TEST FAMILIARIZATION PERIOD**

- You will be allowed 15 minutes to familiarize yourself with the crane and to examine anything on the crane that you feel is necessary to operate it comfortably.
- You will be allowed to get the feel of the controls and run the crane through its functions. The jib length has been preset. The brakes and other devices have been set according to the crane manufacturer's recommendations.

- You may not interfere with the test course, lift the Test Weight, or shadow the Zigzag Corridor and Load Circle.
- You must finish the Pre-test Familiarization Period with the load hook under control in the Start Circle within the 15-minute period.
- The Examiner will notify you when there are ten, five, and one minute(s) remaining.
- If you are ready in less than 15 minutes, you may indicate this to the Examiner.
- If, at the end of the Pre-Test Familiarization Period, you feel you are not ready to take the examination, you should notify the Examiner. You will have, in effect, disqualified yourself from taking the examination at this time, and you will be required to sign to that effect on the Candidate Score Sheet.

### **TASK 1: PLACE LOAD HOOK AND CHAIN IN STOP CIRCLE**

*Optimum time: 1½ minutes*

- At the Examiner's indication to start, at which point timing begins, raise the load hook and chain at least 10 ft. off the ground to clear all obstacles and personnel.
- Bring it from its starting position in the Start Circle to the Stop Circle.
- Once the load hook and chain reaches the Stop Circle, place it there such that the chain suspended from the hook makes contact with the ground inside the circle and remains there.
- Once the chain makes contact with the ground inside the circle, you are not permitted to lift the chain off the ground.
- The Examiner will give you a *stop* signal once the load hook and chain are under control.
- Points will be deducted for the following:
  - a. Dragging or contact of chain outside of the circle
  - b. Load hook touching ground either inside or outside of the circle
  - c. Load hook or chain contacting any part of the course (e.g., poles)
  - d. Lifting the chain off the ground after it has made contact with the ground inside the circle
  - e. Exceeding the optimum time



## PRE-TASK FAMILIARIZATION PERIOD (WITH TEST WEIGHT)

*This part of the test is not scored.*

- At the Examiner's indication, bring the load hook over the Test Weight located in the Test Weight Circle.
- The load will be attached to the crane's load hook by the Examiner or Proctor.
- You are allowed to bring the Test Weight to the designated area where you can get the feel of the load, test the brake, etc., before beginning the Load Circle task.
- You may not swing the load outside of the designated area or shadow the Zigzag course.
- You will be allowed a maximum of five minutes for this Pre-Task Familiarization, by the end of which period you must have placed the Test Weight on the ground in the Test Weight Circle with the rigging taut.
- The Examiner will notify you when there is one minute remaining.

## TASK 2: PLACE TEST WEIGHT IN LOAD CIRCLE

*Optimum time: 4 minutes*

- At the Examiner's indication to start, bring the Test Weight from the Test Weight Circle to the Load Circle.
- Swing, trolley, or hoist as necessary to place the Test Weight on the ground completely within the Load Circle.
- The Examiner will then give the *hoist* and *swing* signal, and this will indicate that you should then hoist and swing to place the Test Weight on the ground in the Start Circle.
- Do not let any part of the Test Weight make contact with the PVC barriers that surround the Load and Start Circles.
- Timing ends when you have placed the Test Weight on the ground in the Start Circle. The task is not complete until the load is placed completely within the outside perimeter of the circle and the Examiner has given you a *stop* signal. If the Examiner has not given you a *stop* signal, this indicates that the weight is not within the circle and the task continues to be timed.
- Points will be deducted for the following:
  - a. Knocking ball off pole
  - b. Knocking pole over
  - c. Exceeding the optimum time
  - d. Hitting any part of the course

## TASK 3: NEGOTIATE ZIGZAG CORRIDOR WITH LOAD

*Optimum time: 3 minutes each direction*

This task is divided into two tasks: 3a and 3b. Task 3a requires you to go through the corridor in a forward direction; Task 3b requires you to go through the corridor in a reverse direction.

- At the Examiner's direction to start, at which point timing begins, lift the Test Weight into the air and swing, trolley, or hoist up or down as you judge necessary to guide the load through the Zigzag Corridor without touching the ground with the Test Weight, raising the Test Weight so high that the chains leave the ground, or knocking over any part of the PVC barrier. Points will be deducted for the following:
  - a. Knocking ball off pole
  - b. Moving pole base off line
  - c. Knocking pole over
  - d. Chain leaving ground
  - e. Passing poles with chain off ground
  - f. Load touching ground
  - g. Circumventing the task
  - h. Exceeding the optimum time
- Timing stops when you have placed the Test Weight on the ground in the Stop Circle and the Examiner has given you a *stop* signal. The task is not complete until the load is placed completely within the outside perimeter of the circle and the Examiner has given you a *stop* signal. If the Examiner does not give you a *stop* signal, this indicates the weight is not within the circle, and the task continues to be timed.
- The Proctor will then detach the Test Weight from the load hook.
- At the Examiner's direction, swing the load hook to the Start Circle and allow the Examiner to attach the chain in readiness for the next candidate. Remain in the cab or at the operator's station until the Examiner gives you a clear indication that you may leave. Set the swing brake and lock before leaving.

## POST-TEST PROCEDURES

Once you have completed the Practical Examination:

- The Examiner will record your performance.
- The Examiner is not permitted to review your score sheet or discuss your performance on the test.

- Exam results will be mailed to you within approximately twelve working days of International Assessment Institute's receipt of the score sheet.
- If you have made formal application to test on other cranes, return to the candidate briefing area.
- If you have completed all of your tests, you must leave the Test Site.



## **Candidate Application Forms**

*Please photocopy and complete all sides of the following forms when applying for NCCCO Written and Practical Examinations.*

- **Candidate Application—Written Examination**
- **Candidate Application—Practical Examination**
- **Candidate Recertification Application—Written Examination**
- **Change of Address Form**
- **Physical Examination Form**

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# Candidate Application

## WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

Please type or print neatly.

NAME		First	Middle	Last
NCCCO CERTIFICATION NUMBER (if previously certified)		DATE OF BIRTH		SOCIAL SECURITY #
MAILING ADDRESS		CITY		STATE ZIP
PHONE	CELL	FAX	E-MAIL	
COMPANY/ORGANIZATION			PHONE	
COMPANY MAILING ADDRESS		CITY		STATE ZIP

I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).  
*(For details on NCCCO's Testing Accommodations policy, please see <http://www.nccco.org/general/accommodations.html>.)*

### WRITTEN EXAMINATION(S) FOR WHICH YOU ARE APPLYING

**FILL IN** the circle next to the crane type(s) for which you are applying; for Mobile Cranes, **CHECK**  the load chart you want to use for that crane type. Also **FILL IN** the appropriate circle(s) below for correct fees. **NOTE:** If you are registering for Mobile Crane exams, you must register for the Mobile Core Exam and at least one Specialty Exam (unless you are a Retest Candidate).

*If you are recertifying, please use separate Recertification Written Examination Application Form.*

#### WRITTEN EXAMS

LOAD CHARTS		
<input type="radio"/> Mobile Core Exam	652603	(Check one for each Specialty Exam)
<input type="radio"/> Lattice Boom Crawler	652620	<input type="checkbox"/> American LBC
	652607	<input type="checkbox"/> Manitowoc LBC
<input type="radio"/> Lattice Boom Truck	652609	<input type="checkbox"/> Link-Belt LBT
	652610	<input type="checkbox"/> Manitowoc LBT
<input type="radio"/> Telescopic Boom—	652612	<input type="checkbox"/> Grove TLL
Swing Cab	652613	<input type="checkbox"/> Link-Belt TLL
<input type="radio"/> Telescopic Boom—	652616	<input type="checkbox"/> Manitex TSS
Fixed Cab	652650	<input type="checkbox"/> Broderson TSS
<input type="radio"/> Tower Crane	654601	
<input type="radio"/> Overhead Crane	653601	

#### WRITTEN EXAM/RETEST FEES

<b>MOBILE CRANE EXAMS</b>	
<input type="radio"/> Core Exam plus one Specialty Exam .....	\$165
<input type="radio"/> Core Exam plus two Specialty Exams .....	\$175
<input type="radio"/> Core Exam plus three Specialty Exams .....	\$185
<input type="radio"/> Core Exam plus four Specialty Exams .....	\$195
<b>RETEST or ADDED SPECIALTY FEES</b>	
<input type="radio"/> Core Exam only (Retest) .....	\$165
<input type="radio"/> One Specialty Exam (Retest or Added Specialty) .....	\$65
<input type="radio"/> Two Specialty Exams (Retest or Added Specialty) .....	\$75
<input type="radio"/> Three Specialty Exams (Retest or Added Specialty) .....	\$85
<input type="radio"/> Four Specialty Exams (Retest) .....	\$95
<b>TOWER CRANE EXAMS</b>	
<input type="radio"/> Tower Crane Written Exam (new Candidate) .....	\$165
<input type="radio"/> Tower Crane Written Exam (current NCCCO-certified Mobile Crane Operator, or new candidate taking exam same time as Mobile Crane exams) .....	\$50
<b>OVERHEAD CRANE EXAMS</b>	
<input type="radio"/> Overhead Crane Written Exam (new Candidate) .....	\$165
<input type="radio"/> Overhead Crane Written Exam (current NCCCO-certified Mobile Crane Operator, or new candidate taking exam same time as Mobile Crane exams) .....	\$50
<b>TOTAL AMOUNT DUE .....</b>	<b>\$</b> <input style="width: 100px;" type="text"/>

#### OTHER FEES

- Candidate Late Fee (if applicable) ..... \$50
- Incomplete Application Fee (if applicable) ..... \$30
- Updated/Replacement Card..... \$25

**ADD TO TOTAL AMOUNT AT RIGHT** →

# CANDIDATE APPLICATION (CONT'D)

## WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

### TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION




TEST SITE NAME	TEST SITE COORDINATOR		
TEST SITE ADDRESS			
CITY	STATE	ZIP	
TEST SITE NUMBER	DATE YOU INTEND TO TAKE THE CCO EXAMINATION		

*Under penalties of perjury, I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO's policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I consent to NCCCO's release of any information regarding this application and my examination administration to third parties. I have received a copy of the NCCCO Candidate Handbook and have read it; I understand and agree to be bound by all prevailing NCCCO policies and procedures. I attest that I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO's substance abuse policy. I have passed a physical exam that complies with the ASME B30 standard for my certification category and I will continue to comply with those requirements.*

CANDIDATE SIGNATURE	DATE
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### METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

**Do not send cash.**

<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> Personal check enclosed	<input type="checkbox"/> Employer check enclosed	<input type="checkbox"/> Money Order enclosed	<i>Please do not staple your check or money order.</i>
--	--	--	--	--	---	--

**If paying by credit card, complete the following information:**

CREDIT CARD NUMBER	<input type="text"/>	EXPIRATION DATE	<input type="text"/>
NAME (Print as it appears on card)	SIGNATURE (on card)	SECURITY CODE*	<input type="text"/>

\* Three- or four-digit security code located on the back of the card in the signature panel.

*Checks and money orders should be payable to:* International Assessment Institute—Attention: CCO Testing

*Please send application and payments to:*

International Assessment Institute—Attention: CCO Testing  
 600 Cleveland Street, Suite 900  
 Clearwater, Florida 33755  
 Phone: 727-449-8525  
 Fax: 727-461-2746



# Candidate Application

## PRACTICAL EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

*Please type or print neatly.*

NAME			First	Middle	Last
NCCCO CERTIFICATION NUMBER (if previously certified)			SOCIAL SECURITY #		
MAILING ADDRESS					DATE OF BIRTH
CITY			STATE	ZIP	
PHONE	CELL	FAX		E-MAIL	
COMPANY/ORGANIZATION			PHONE		
COMPANY MAILING ADDRESS					
CITY			STATE	ZIP	

**INDICATE WITH A CHECK THE CRANE TYPE(S) YOU WISH TO BE TESTED ON:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Lattice Boom Crane | <input type="checkbox"/> Telescopic Boom Crane—Swing Cab | <input type="checkbox"/> Tower Crane    |
|   | <input type="checkbox"/> Telescopic Boom Crane—Fixed Cab | <input type="checkbox"/> Overhead Crane |

**TEST SITE AT WHICH YOU INTEND TO TAKE THE PRACTICAL EXAMINATION:**

TEST SITE COORDINATOR NAME		PE SITE #:
PHONE	FAX	E-MAIL
TEST SITE PHYSICAL ADDRESS		
CITY	STATE	ZIP

*Under penalties of perjury, I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO's policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I consent to NCCCO's release of any information regarding this application and my examination administration to third parties. I have received a copy of the NCCCO Candidate Handbook and I have read it; I understand and agree to be bound by all prevailing NCCCO policies and procedures. I attest that I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO's substance abuse policy. I have passed a physical exam that complies with the ASME B30 standard for my certification category and I will continue to comply with those requirements.*

CANDIDATE SIGNATURE	DATE
---------------------	------

**THIS AREA FOR NCCCO/IAI USE ONLY:**

- |                            |                                 |                |
|----------------------------|---------------------------------|----------------|
| Lattice Boom Crawler Crane | Telescopic Boom Crane—Swing Cab | Tower Crane    |
| Lattice Boom Truck Crane   | Telescopic Boom Crane—Fixed Cab | Overhead Crane |

# CANDIDATE APPLICATION (CONT'D)

## PRACTICAL EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

### NCCCO CERTIFICATION CARD

Candidates who meet all the requirements for certification in any one category are issued a certification card at no charge. Replacement and updated cards are available for an additional fee; see panel below.

Please attach a passport color photo (without hat or sunglasses) and enclose with your application form any required payment based upon the information listed below.

A digital photo may be substituted for a passport photo.

Attach Color  
Passport Photo  
Here

1-3/8" W x 1-3/4" H

### PRACTICAL EXAMINATION FEES

Checks and money orders must be made payable to **International Assessment Institute—Attention: CCO Testing**. Credit cards (Visa, Master Card, or American Express) may be used by completing the credit card information below.




Check the box(es) next to the Practical Exam category(s) for which you are registering.

#### Practical Examination Fees:

- One Mobile Crane type: \$60     Two Mobile Crane types: \$70     Three Mobile Crane types: \$80
- Tower Crane only: \$60
- Tower Crane (current NCCCO-certified Mobile Crane Operator, or new candidate registering for Mobile Crane Operator exams at the same time): \$50
- Overhead Crane only: \$60
- Overhead Crane (current NCCCO-certified Mobile Crane Operator, or new candidate registering for Mobile Crane Operator exams at the same time): \$50
- Updated/replacement card: \$25

### METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

**Do not send cash.**

<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> Personal check enclosed	<input type="checkbox"/> Employer check enclosed	<input type="checkbox"/> Money order enclosed	<i>Please do not staple your check or money order.</i>
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**If paying by credit card, complete the following information:**

CREDIT CARD NUMBER	<input type="text"/>	EXPIRATION DATE	<input type="text"/>
NAME (Print as it appears on card)	SIGNATURE (on card)	SECURITY CODE*	<input type="text"/>

\* Three or four digit security code located on the back of the card in the signature panel.

Checks and money orders should be payable to: International Assessment Institute—Attention: CCO Testing

**Do not send this application to IAI or NCCCO. Give this application, along with payment and all necessary documentation, to your Test Site Coordinator on test day.**





# Recertification Application

## WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

*Please type or print neatly.*

NAME First		Middle		Last	
NCCCO CERTIFICATION NUMBER		DATE OF BIRTH		SOCIAL SECURITY #	
MAILING ADDRESS		CITY		STATE	ZIP
PHONE	CELL	FAX	E-MAIL		
COMPANY/ORGANIZATION				PHONE	
COMPANY MAILING ADDRESS		CITY		STATE	ZIP

I AM REQUESTING TESTING ACCOMMODATIONS IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA).  
 (For details on NCCCO's Testing Accommodations policy, please see <http://www.nccco.org/general/accommodations.html>.)

### WRITTEN EXAMINATIONS FOR WHICH YOU ARE APPLYING

*This application is for recertification only. You may ONLY recertify in the category(ies) in which you are currently certified. FILL IN the circle next to the crane type(s) for which you are applying for recertification. If you would like to take Additional Examinations for cranes that you are not currently certified on, then FILL IN the examinations of your choice and CHECK the load chart you want to use for that crane type.*

#### EXAMINATIONS

RECERTIFICATION EXAMS		LOAD CHARTS
<input type="radio"/> Core Exam	652605	(Check one for each Specialty Exam)
<input type="radio"/> Lattice Boom Crawler	652625	<input type="checkbox"/> American LBC
	652608	<input type="checkbox"/> Manitowoc LBC
<input type="radio"/> Lattice Boom Truck	652611	<input type="checkbox"/> Link-Belt LBT
	652635	<input type="checkbox"/> Manitowoc LBT
<input type="radio"/> Telescopic Boom— Swing Cab	652614	<input type="checkbox"/> Grove TLL
	652645	<input type="checkbox"/> Link-Belt TLL
<input type="radio"/> Telescopic Boom— Fixed Cab	652656	<input type="checkbox"/> Manitex TSS
	652655	<input type="checkbox"/> Broderson TSS
<input type="radio"/> Tower Crane	654602	
<input type="radio"/> Overhead Crane	653602	

ADDITIONAL EXAMINATIONS		LOAD CHARTS
		(Check one for each Specialty Exam)
<input type="radio"/> Lattice Boom Crawler	652620	<input type="checkbox"/> American LBC
	652607	<input type="checkbox"/> Manitowoc LBC
<input type="radio"/> Lattice Boom Truck	652609	<input type="checkbox"/> Link-Belt LBT
	652610	<input type="checkbox"/> Manitowoc LBT
<input type="radio"/> Telescopic Boom— Swing Cab	652612	<input type="checkbox"/> Grove TLL
	652613	<input type="checkbox"/> Link-Belt TLL
<input type="radio"/> Telescopic Boom— Fixed Cab	652616	<input type="checkbox"/> Manitex TSS
	652650	<input type="checkbox"/> Broderson TSS
<input type="radio"/> Tower Crane	654601	
<input type="radio"/> Overhead Crane	653601	

#### RECERTIFICATION EXAM FEES/RETEST FEES

- Mobile Core Exam plus one Specialty Exam ..... \$150
- Mobile Core Exam plus two Specialty Exams ..... \$155
- Mobile Core Exam plus three Specialty Exams ..... \$160
- Mobile Core Exam plus four Specialty Exams ..... \$165
- Tower Crane (only) ..... \$150
- Tower Crane (with Mobile Crane) ..... \$50
- Overhead Crane (only) ..... \$150
- Overhead Crane (with Mobile Crane) ..... \$50

- Mobile Core Exam only (Retest) ..... \$150
- One Mobile Specialty Exam (Retest) ..... \$50
- Two Mobile Specialty Exams (Retest) ..... \$55
- Three Mobile Specialty Exams (Retest) ..... \$60
- Four Mobile Specialty Exams (Retest) ..... \$65

#### ADDITIONAL EXAM FEES\*

(\*ONLY for candidates adding to existing Mobile certifications; for candidates adding Mobile to Tower or Overhead certifications, use standard Written Exam Candidate Application form.)

- One Mobile Specialty Exam ..... \$65
- Two Mobile Specialty Exams ..... \$75
- Three Mobile Specialty Exams ..... \$85
- Tower Crane Exam ..... \$50
- Overhead Crane Exam ..... \$50

- Candidate Late Fee (if applicable) ..... \$50
- Incomplete Application Fee (if applicable) ..... \$30

**TOTAL AMOUNT DUE** ..... \$

# CANDIDATE RECERTIFICATION APPLICATION (CONT'D)

## WRITTEN EXAMINATION—MOBILE, TOWER, & OVERHEAD CRANE OPERATOR

### TEST SITE AT WHICH YOU INTEND TO TAKE THE WRITTEN EXAMINATION

TEST SITE NAME	TEST SITE COORDINATOR	
TEST SITE ADDRESS		
CITY	STATE	ZIP
TEST SITE NUMBER	DATE YOU INTEND TO TAKE THE NCCCO EXAMINATION	

I do NOT have 1,000 hours of documented crane-related experience, and I must therefore take an NCCCO Practical Exam for each category in which I wish to be recertified.

*Under penalties of perjury, I declare that the foregoing statements and those in any required accompanying documentation are true. I understand and agree that my failure to provide accurate and complete information or abide by NCCCO's policies and procedures, including the Code of Ethics, shall constitute grounds for the rejection of my application, or denial or revocation of my certification. I understand that NCCCO reserves the right to verify any information in this application or in connection with my certification. I consent to NCCCO's release of any information regarding this application and my examination administration to third parties. I have received a copy of the NCCCO Candidate Handbook and have read it; I understand and agree to be bound by all prevailing NCCCO policies and procedures. I attest that I have passed a substance abuse test conducted by a recognized laboratory service and agree to comply with NCCCO's substance abuse policy. I have passed a physical exam that complies with the ASME B30 standard for my certification category and I will continue to comply with those requirements. I further affirm either that I have maintained at least 1,000 hours of crane-related experience in the past five years or, if I have not maintained this experience, I have checked the box above this panel indicating that before my certification expires I will take and pass a practical exam for each category in which I wish to be recertified.*

CANDIDATE SIGNATURE	DATE
---------------------	------

### METHOD OF PAYMENT FOR CANDIDATE EXAMINATION FEES

*Do not send cash.*

<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Personal check enclosed	<input type="checkbox"/>	Employer check enclosed	<input type="checkbox"/>	Money order enclosed	<i>Please do not staple your check or money order.</i>
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**If paying by credit card, complete the following information:**

CREDIT CARD NUMBER	EXPIRATION DATE
NAME (Print as it appears on card)	SIGNATURE (on card)
SECURITY CODE*	

\* Three- or four-digit security code located on the back of the card in the signature panel.

*Checks and money orders should be payable to:* International Assessment Institute—Attention: CCO Testing

*Please send application and payments to:* International Assessment Institute—Attention: CCO Testing  
 600 Cleveland Street, Suite 900  
 Clearwater, Florida 33755  
 Phone: 727-449-8525  
 Fax: 727-461-2746

### CANDIDATE APPLICATION CHECKLIST

- I have completed and signed the *Candidate Application*.
- I have provided credit card information or a check or money order for the correct amount due.
- I have attached a color passport photo (full face, no sunglasses, no hat). A digital photo may be substituted for a passport photo.

For additional information regarding **recertification**, contact:

National Commission for the Certification of Crane Operators (NCCCO)		
2750 Prosperity Avenue, Suite 505	Phone: 703-560-2391	info@nccco.org
Fairfax, VA 22031	Fax: 703-560-2392	www.nccco.org

Attach Color  
Passport Photo  
Here

1-3/8" W x 1-3/4" H



# Change of Address Form

*Please use this form to advise of any changes of address. Please mail or fax this to:*

International Assessment Institute (IAI)  
600 Cleveland Street, Suite 900  
Clearwater, Florida 33755

Phone: 727-449-8525  
Fax: 727-461-2746

*Please type or print neatly.*

NAME	FIRST	MIDDLE	LAST
NCCCO CERTIFICATION NUMBER (IF PREVIOUSLY CERTIFIED)		SOCIAL SECURITY #	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

## OLD ADDRESS

MAILING ADDRESS		
CITY	STATE	ZIP
PHONE	FAX	E-MAIL
COMPANY / ORGANIZATION	PHONE	
COMPANY MAILING ADDRESS		
CITY	STATE	ZIP

## NEW ADDRESS

MAILING ADDRESS		
CITY	STATE	ZIP
PHONE	FAX	E-MAIL
COMPANY / ORGANIZATION	PHONE	
COMPANY MAILING ADDRESS		
CITY	STATE	ZIP

## EFFECTIVE DATE OF CHANGE

<input type="text"/>
----------------------

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# Physical Examination Form

Please type or print neatly.

NAME	First	Middle	Last
SOCIAL SECURITY #			DATE OF EXAMINATION
HOME ADDRESS			PHONE
CITY	STATE	ZIP	

## HEALTH HISTORY

Yes	No	Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IF ANSWER TO ANY OF THE ABOVE IS YES, PLEASE EXPLAIN

## GENERAL APPEARANCE AND DEVELOPMENT:

Good       Fair       Poor

**VISION:** For distance       Right/20       Left/20       Both/20       Without corrective lenses  
 With corrective lenses

Evidence of disease or injury:      Right \_\_\_\_\_      Left \_\_\_\_\_

Color test:      Right \_\_\_\_\_      Left \_\_\_\_\_

Horizontal field of vision:      Right \_\_\_\_\_      Left \_\_\_\_\_

**HEARING:** Right ear \_\_\_\_\_      Left ear \_\_\_\_\_

Evidence of disease or injury:      Right ear \_\_\_\_\_      Left ear \_\_\_\_\_

**AUDIOMETRIC TEST:**       500 HZ       1000 HZ       2000 HZ       3000 HZ       4000 HZ  
 5000 HZ       6000 HZ       7000 HZ       8000 HZ

**THROAT:** \_\_\_\_\_

**THORAX:** Heart: \_\_\_\_\_

If organic disease is present, is it fully compensated? \_\_\_\_\_

Blood pressure:      Systolic \_\_\_\_\_      Diastolic \_\_\_\_\_

Pulse:      Before exercise \_\_\_\_\_      Immediately after \_\_\_\_\_

Lungs: \_\_\_\_\_

# PHYSICAL EXAMINATION FORM (CONT'D)

**ABDOMEN:** Scars \_\_\_\_\_ Abdominal masses \_\_\_\_\_ Tenderness \_\_\_\_\_

**HERNIA:**  Yes  No If so, where? \_\_\_\_\_ Is truss worn? \_\_\_\_\_

**GASTROINTESTINAL:** Ulceration or other disease?  Yes \_\_\_\_\_  No \_\_\_\_\_

**GENITO-URINARY:** Scars \_\_\_\_\_ Urinal discharge \_\_\_\_\_

**REFLEXES:** Rhomberg \_\_\_\_\_

Pupillary \_\_\_\_\_ Light: Right \_\_\_\_\_ Left \_\_\_\_\_

Accommodation \_\_\_\_\_ Right \_\_\_\_\_ Left \_\_\_\_\_

**KNEE JERKS:** Right Normal \_\_\_\_\_ Increased \_\_\_\_\_ Absent \_\_\_\_\_

Left Normal \_\_\_\_\_ Increased \_\_\_\_\_ Absent \_\_\_\_\_

**REMARKS:** \_\_\_\_\_

**EXTREMITIES:** Upper \_\_\_\_\_ Lower \_\_\_\_\_ Spine \_\_\_\_\_

**LABORATORY & OTHER SPECIAL FINDINGS:** Urine Spec. Gr. \_\_\_\_\_ Alb. \_\_\_\_\_ Sugar \_\_\_\_\_

Other Laboratory Data (Serology, etc.) \_\_\_\_\_

Radiological Data \_\_\_\_\_ Electrocardiograph \_\_\_\_\_

**GENERAL COMMENTS:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NAME OF EXAMINING DOCTOR (PLEASE PRINT)	SIGNATURE	
ADDRESS OF EXAMINING DOCTOR		
CITY	STATE	ZIP

## MEDICAL EXAMINER'S CERTIFICATE (ONLY TO BE COMPLETED IF OPERATOR IS FOUND QUALIFIED)

**MEDICAL EXAMINER'S CERTIFICATE**

*I certify that I have examined*

---

CRANE OPERATOR'S NAME

*with the knowledge of his/her duties,  
I find him/her qualified under the regulations.*

Qualified only when wearing corrective lenses.

Qualified only when wearing a hearing aid.

Qualified—see Accommodation Statement attached.

A complete examination form for this person is on file in my office:

ADDRESS	
DATE OF EXAMINATION	NAME OF EXAMINING DOCTOR
SIGNATURE OF EXAMINING DOCTOR	
SIGNATURE OF OPERATOR	
ADDRESS OF OPERATOR	

**MEDICAL EXAMINER'S CERTIFICATE**

*I certify that I have examined*

---

CRANE OPERATOR'S NAME

*with the knowledge of his/her duties,  
I find him/her qualified under the regulations.*

Qualified only when wearing corrective lenses.

Qualified only when wearing a hearing aid.

Qualified—see Accommodation Statement attached.

A complete examination form for this person is on file in my office:

ADDRESS	
DATE OF EXAMINATION	NAME OF EXAMINING DOCTOR
SIGNATURE OF EXAMINING DOCTOR	
SIGNATURE OF OPERATOR	
ADDRESS OF OPERATOR	



# Physician Instructions

## PLEASE GIVE THESE INSTRUCTIONS TO THE EXAMINING PHYSICIAN

### PHYSICAL QUALIFICATIONS AND EXAMINATIONS OF CRANE OPERATORS

A person is physically qualified to operate a crane if that person:

1. Has no loss of a foot, a leg, a hand, or an arm, or has been granted a waiver
2. Has no impairment of the use of a foot, a leg, a hand, fingers, or an arm, and no other structural defect or limitation, which is likely to interfere with his/her ability to control and safely operate a crane or has been granted a waiver upon a determination that the impairment will not interfere with his/her ability to control and safely operate a crane
3. Has no established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control
4. Has no current clinical diagnosis of myocardial infarction, angina pectoris, coronary insufficiency, thrombosis, or any other cardiovascular disease of a variety to be known accompanied by syncope, dyspnea, collapse, or congestive cardiac failure
5. Has no established medical history or clinical diagnosis of respiratory dysfunction likely to interfere with his/her ability to control and operate a crane safely
6. Has no current clinical diagnosis of high blood pressure likely to interfere with his/her ability to operate a crane
7. Has no established medical history or clinical diagnosis of rheumatic, arthritic, orthopedic, muscular, neuromuscular, or vascular disease that interferes with his/her ability to control and operate a crane safely
8. Has no established medical history or clinical diagnosis of epilepsy or any other condition that is likely to cause loss of consciousness or any loss of ability to control a crane
9. Has no mental, nervous, organic, or functional disease or psychiatric disorder likely to interfere with his/her ability to operate a crane
10. Has distant visual acuity of at least 20/40 (Snellen) in each eye without corrective lenses or visual acuity separately corrected to 20/40 (Snellen) or better with corrective lenses, distant binocular acuity of at least 20/40 (Snellen) in both eyes with or without corrective lenses, field of vision of at least 70 degrees in the horizontal median in each eye, and the ability to recognize the colors of traffic signals and devices showing standard red, green, and amber
11. When tested by use of an audiometric device, does not have an average hearing loss in the better ear greater than 40 decibels at 500 Hz, 1,000 Hz, 2,000 Hz, 3,000 Hz and 4,000 Hz with or without a hearing aid when the audiometric device is calibrated to American National Standard (formerly ASA Standard) Z24.5-1951
12. Does not use a prescribed or over-the-counter substance, including ethanol, which would impair the operator's performing safe operation of a crane. These include illegal drugs, controlled substances (including trace amounts), look-alike drugs, designer drugs, or any other substance that may have the effect on the human body of being a narcotic, depressant, stimulant, or hallucinogen. An exception to this ruling is that an operator may use such a substance or drug if the substance or drug is prescribed by a licensed medical practitioner who is familiar with the operator's medical history and all assigned duties and who has advised the operator that the prescribed substance or drug will not adversely affect the operator's ability to safely operate a crane. The treating physician will also provide a waiver to the Medical Examiner. (See waiver statement.)

### INSTRUCTIONS FOR PERFORMING AND RECORDING PHYSICAL EXAMINATIONS

The examining physician should review these instructions before performing the physical examination. Answer each question *yes* or *no*, where appropriate.

The examining physician should be aware of the rigorous physical demands and mental and emotional responsibilities placed on the crane operators. In the interest of public safety, the examining physician is required to certify that the operator does not have any physical, mental, or organic defect of such a nature as to affect the operator's ability to operate a crane safely.

**General Information.** The purpose of this history and physical examination is to detect the presence of physical, mental, or organic defects of such a character and extent as to affect the applicant's ability to operate a crane safely. The examination should be made carefully and at least as completely as indicated by the attached form. History of certain defects may be cause for rejection or indicate the need for making certain laboratory tests or a further, and more stringent, examination. Defects may be recorded that do not, because of their character or degree, indicate that certification of physical fitness should be denied. However, these defects should be discussed with the applicant and he/she should be advised to take the necessary steps to ensure correction, particularly of those which, if neglected, might lead to a condition likely to affect his/her ability to operate safely.

**General Appearance and development.** Not marked overweight. Not any posture defect, perceptible limp, tremor, or other defects that might be caused by alcoholism, thyroid intoxication, or other illnesses including sedating or habit-forming drugs.

**Head—eyes.** When other than the Snellen chart is used, the results of such test must be expressed in values comparable to the standard Snellen test. If the applicant wears corrective lenses, these should be worn while applicant's visual acuity is being tested. If appropriate, indicate on the Medical Examiner's Certificate by checking the box *Qualified only when wearing corrective lenses*. In recording distance vision, use 20 feet as normal. Report all vision as a fraction with 20 as a numerator and the smallest type read at 20 feet as denominator. Note ptosis, discharge, visual fields, ocular muscle imbalance, color blindness, corneal scar, exophthalmos, or strabismus uncorrected by corrective lenses.

Contact lens wear may not be allowed in many work areas where mandatory eye protection disallows contact lens wear. The applicant must be made aware that safety glass eye wear may routinely be required at job sites and must also pass vision testing protocols with safety eye glasses specified and approved ANSI Z89.

**Ears.** Note evidence of mastoid of middle ear disease, discharge, symptoms of aura vertigo, or Meniere's Syndrome. When recording hearing an audiometer is used to test hearing. Record decibel loss at 500 Hz, 1,000 Hz, 2,000 Hz, 3,000 Hz, and 4,000 Hz.

**Throat.** Note evidence of disease, irremediable deformities of the throat likely to interfere with eating or breathing, or any laryngeal condition that could interfere with the safe operation of a crane.

**Thorax—heart.** Stethoscopic examination is required. Note murmurs and arrhythmias and any past or present history of cardiovascular disease of a variety known to be accompanied by syncope, dyspnea, collapse, enlarged heart, or congestive heart failures. An electrocardiogram is required when findings so indicate.

**Blood Pressure.** Record with either spring or mercury column type of sphygmomanometer. If the blood pressure is consistently above 160/90mm. Hg., further tests may be necessary to determine whether the operator is qualified to operate a crane.

**Lungs.** If any lung disease is detected, state whether active or arrested; if arrested, your opinion as to how long it has been quiescent.

**Gastrointestinal system.** Note any diseases of the gastrointestinal system.

**Abdomen.** Note wounds, injuries, scars, or weakness of muscles of abdominal walls sufficient to interfere with normal function. Any hernia should be noted if present. State how long and if adequately contained by truss.

**Abnormal masses.** If present, note location, if tender, and whether or not applicant knows how long they have been present. If the diagnosis suggests that the condition might interfere with the control and safe operation of a crane, more stringent tests must be made before the applicant can be certified.

**Genitourinary.** Urinalysis is required. Acute infections of the genitourinary tract, as defined by local and state public health laws, indications from urinalysis of uncontrolled diabetes, symptomatic albuminuria in the urine, or other findings indicative of health conditions likely to interfere with the control and safe operation of a crane will disqualify an applicant from operating a crane.

**Neurological.** If positive Rhomberg is reported, indicate degrees of impairment. Pupillary reflexes should be reported for both light and accommodation.

Knee jerks are to be reported absent only when not obtainable upon reinforcement and as increased when foot is actually lifted from the floor following a light blow on the patella; sensory vibratory and positional abnormalities should be noted.

**Extremities.** Carefully examine upper and lower extremities. Record the loss or impairment of a leg, foot, toe, arm, hand, or fingers. Note any and all deformities, the presence of atrophy, semiparalysis or paralysis, or varicose veins. If a hand or finger deformity exists, determine whether sufficient grasp is present to enable the operator to secure and maintain a grip on the controls. If a leg deformity exists, determine whether sufficient mobility and strength exists to enable the operator to operate pedals properly. Particular attention should be given to, and a record should be made of, any impairment

or structural defect that may interfere with the operator's ability to operate a crane safely.

**Spine.** Note deformities, limitation of motion, or any history of pain, injuries, or disease, past or presently experienced in the cervical or lumbar spine region. If findings so dictate, radiologic and other examinations should be used to diagnose congenital or acquired defects, spondylolisthesis, or scoliosis.

**Recto-genital studies.** Diseases or conditions causing discomfort should be evaluated carefully to determine the extent to which the condition might be handicapping while lifting, pulling, or during periods of prolonged operation that might be necessary as part of the operator's duties.

**Laboratory and other special findings.** Urinalysis is required, as well as such other tests as the medical history or findings upon physical examination may indicate are necessary. A serological test is required if the applicant has a history of luetic infection or present physical findings indicate the possibility of latent syphilis. Other studies deemed advisable may be ordered by the examining physician.

**Diabetes.** If insulin is necessary to control a diabetic condition, the operator is not qualified to operate a crane. If mild diabetes is noted at the time of examination and it is stabilized by use of a hypoglycemic drug and a diet that can be obtained while the operator is on duty, it should not be considered disqualifying. However, the operator must remain under adequate medical supervision.

**General.** The physician must date and sign his findings upon completion of the examination.

The medical examination shall be performed by a licensed doctor of medicine or osteopathy. A licensed ophthalmologist or optometrist may perform examinations pertaining to visual acuity, field of vision, and ability to recognize colors.

If the medical examiner finds that the person he/she examined is physically qualified to operate a crane, the medical examiner shall complete the Medical Examiner's Certificate and furnish one copy to the person examined and one copy to the employer.

The medical examiner must attach all treating physician, ophthalmologist, or optometrist medical information pertaining to the applicant. Waiver acceptance is up to the medical examiner when waiver is attached to applicant application. The medical examiner is expected to verify the waiver provided by treating physician and qualify or disqualify applicant because of his examination of the applicant.

The medical examiner is expected to perform testing as needed of all applicants and may submit an accommodation statement, if applicable, about an applicant's physical limitations to aid an employer with ADA guidelines. Any accommodation statements must be attached to medical artifaction.

**Waiver by physician.** Treating physicians must provide signed statements disclosing disease state and/or medication and that the applicant is qualified for the practical examination, and state, "I have examined the aforementioned crane operator applicant and within medical certainty I find the applicant at no greater risk than the general population as a result of any physical, mental, or organic defects, and can safely operate a crane with the aforementioned diagnosis and treatment regimen subject to passing the CCO practical examination."





# NCCCO Information Release Policy

## A. Definitions

1. “NCCCO” means and refers to the National Commission for the Certification of Crane Operators acting through its staff and authorized agents and representatives.
2. “Releasable Information” means and refers to the following information: name, certification status, examination dates, certification dates, and designations.
3. “Third Party” means and refers to an employer, prospective employer, regulatory agency, or any other person or entity that makes an inquiry to NCCCO.

## B. Policies

1. It shall be the policy of NCCCO to provide Releasable Information pertaining to individuals who have successfully passed one or more NCCCO examinations. It shall also be the policy of NCCCO to provide Releasable Information pertaining to such individuals on its website using such protocols as may be established.
2. Releasable Information may be released to a Third Party who makes a written request, including by electronic correspondence. Generally, Releasable Information will be released within one business day from actual receipt of a written request.
3. If a Third Party requests information concerning an individual who has not taken or successfully passed an NCCCO examination, NCCCO may release a statement confirming that, as of a given date, the individual does not appear on NCCCO’s list of successful candidates in one or more categories of certification.
4. If an individual is currently under formal suspension or investigation by NCCCO, NCCCO may release a statement to a Third Party to that effect.
5. If a Third Party seeks information other than the foregoing information, generally, absent a subpoena or similar legal process, such information will not be released. However, in the course of business, as circumstances reasonably warrant, NCCCO reserves the discretion to release information other than the foregoing information.
6. Certain situations may require or warrant the immediate verbal confirmation of an individual’s certification status or other Releasable Information in response to a written or verbal request. Under such

circumstances, NCCCO may provide such immediate verbal confirmation, at its discretion. When such a verbal confirmation is provided, it shall be NCCCO’s policy to follow up with a written confirmation.

7. It shall be the policy of NCCCO to discuss score-related and test-specific matters only with a candidate or a candidate’s authorized legal representative.
8. NCCCO will release Releasable Information about an individual upon receipt of a written request (including electronic correspondence) from that individual. NCCCO may release information other than Releasable Information about an individual, at its discretion, upon receipt of a signed, notarized, written request from that individual. In addition, NCCCO will release information other than Releasable Information about an individual when required by a legal authority of competent jurisdiction under a duly-issued subpoena, subject to any objection, or as otherwise required by law.

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## **IMPORTANT CONTACT INFORMATION**



### **NATIONAL COMMISSION FOR THE CERTIFICATION OF CRANE OPERATORS**

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Fairfax, VA 22031-4312

Phone: 703-560-2391

Fax: 703-560-2392

E-mail: [info@nccco.org](mailto:info@nccco.org)



### **INTERNATIONAL ASSESSMENT INSTITUTE**

Attention: NCCCO Testing  
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Clearwater, Florida 33755

Phone: 727-449-8525

Fax: 727-461-2746



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