



City of Sand Point

www.sandpointak.com
sptharbor@arctic.net

Port and Harbor

PO Box 249, Main St
Sand Point, AK 99661
907.383.2331

DOCK CRANE USE AUTHORIZATION AGREEMENT & OPERATOR PERMIT

Use of the Fish Dock crane in the City of Sand Point harbor is a privilege which will be extended only to those who make safe and proper use of the equipment. The privilege will be granted only to those who have completed City training, purchased an Operator Permit, who have demonstrated an ability to safely and properly use the equipment, and who agree to the following terms:

- I have received and understand the visual and verbal training from the City of Sand Point for the safe and proper use of the dock crane.
- I have successfully demonstrated proficiency on use of the crane which has been observed and verified by authorized port and harbor personnel.
- I agree to not exceed the 1600 lbs working load limits on the crane.
- I agree that if I ever have a question concerning the proper procedures or policies for use of the cranes, I will ask authorized port and harbor personnel for further instruction and I will not use the crane until my questions have been answered.
- I agree that I will not operate a Fish Dock crane without having the Crane Operator Permit in my possession.
- As an operator, I agree to take full responsibility for any damages made to the crane and accept liability, and provide proof of liability insurance covering such activity in an amount of not less than \$1,000,000.
- If I am issued a crane access key, I agree that I will not allow any person to use my key that has not also completed training and received from the City of Sand Point a Crane Operator Permit.
- I agree that if I allow another person to operate a crane using my access key, before doing so I will provide to the port and harbor office proof of liability insurance covering such activity in an amount of not less than \$1,000,000.
- I agree that I will immediately report to port and harbor personnel any accident involving crane use or any malfunction or problem with the cranes.
- I agree to pay an annual Operator Permit fee of **\$100**.

I agree that my Use Authorization Agreement/Crane Operator Permit, and my access key/code (if I have one), may be revoked immediately without prior notice to me if I violate the City of Sand Point policies or procedures for dock crane use, allow a person who does not have a use authorization agreement with the City to use my access card, fail to pay my account in full, or otherwise violate the terms of this agreement.

CRANE OPERATOR PERMIT & PAYMENT INFORMATION

Name: _____ Phone #: _____

Address: _____
P.O. Box or Street Address City State Zip

ID/Driver's License #: _____

Social Security # (optional): _____

Signature

Date

Permit Only? _____ # of KEY(S) _____ Liability Insurance (min. \$1,000,000) _____

THIS USE AUTHORIZATION AGREEMENT/OPERATOR PERMIT IS NOT VALID UNLESS SIGNED BELOW BY AUTHORIZED CITY OF SAND POINT PORT AND HARBOR PERSONNEL.

Training Completed On (Date): _____

Proficiency Test Passed: Y or N

Verified By: _____

Annual payment of **\$ 100** is hereby made and acknowledged by Harbormaster or Harbormaster's representative.

CITY OF SAND POINT
PORT AND HARBOR

Signature

Date