



MEWPs Occupant Knowledge Checklist				
OCCUPANT NAME:	OCCUPANT EMPLOYER NAME:			
MEWP TYPE/MAKE/MODEL:	CHECKLIST COMPLETED BY:			
OCCUPANT SIGNATURE:	DATE:			
Item	Comments			
1) Fall Protection:	YES	NO	N/A	
a) Understands purpose of guardrails.				
b) Understands use requirements for PFPS*.				
c) Knowledgeable of arrest vs. restraint.				
d) Can identify harness/lanyard/anchor.				
e) Can calculate clearance requirement.				
f) Understands PFPS labels/ratings/specs.				
g) Able to properly inspect components.				
h) Able to properly don harness.				
i) Can identify & connect to suitable anchorage.				
j) Other:				
2) Safe Work Procedures; Understands reasons to avoid:	YES	NO	N/A	
a) Horseplay/Abrupt movements.				
b) Climbing on guardrails.				
c) Leaning too far beyond guardrails.				
d) Not maintaining firm footing.				
e) Leaning over/touching the MEWP controls.				
f) Exceeding load/occupancy ratings.				
g) Poor load weight distribution.				
h) Handling large objects (sails).				
i) Pushing/Pulling objects outside the work platform.				
j) Misusing the MEWP beyond its intended purpose/design.				
k) Leaving/Exiting an elevated work platform.				
l) Other:				
3) Specific Knowledge & Understanding of:	YES	NO	N/A	
a) Use accessories as required.				
b) Site/Task-specific safe work procedures & PPE requirements.				
c) Manufacturer's equipment-specific warnings, decals, labels & instructions.				
d) Location/Use manufacturer's operation manuals.				
e) All information communicated as per safe use plan/site risk assessment.				
f) Use MEWP controls to lower work platform as needed.				
g) Other:				

* Personal fall protection system.