



Forklift Supplemental Application



Company Name		Policy Number	
1	Number of forklifts in operations?		
2	Number of Employees who are designated to operate a forklift.		
3	Are all forklift operators (present or potential) certified in accordance with OSHA regulations?	Yes	No
4	Are you using outside training source or In-House train the Trainer program?	Outside	In-House
4a	Is documentation in place that verifies certification and recertification?	Yes	No
4b	How often do you recertify your forklift operators?		
5	Is there a designated person responsible for monitoring forklift certified operators, including the need for renewal requirements every 3 years? Or for recertification?	Yes	No
6	Is there a system for identifying certified operators such as CARDS, BADGES, POSTED LIST, etc.? Please provide details.	Yes	No
7	Do you allow uncertified operators to operate forklifts for any reason? How do you keep uncertified operators from using forklifts? Please provide details.	Yes	No
8	Are forklift inspections conducted by your personnel documented? If Yes, How often?	Yes	No
9	Do you maintain documented incident reports to determine, analyze, and investigate trends?	Yes	No
10	Is the maintenance completed by an In-house or outside service company?	Outside	Inside
10a	If In-House, provide details or maintenance schedule.		



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10b	If outside service company, Who? And provide details of the service company and their scheduled maintenance program.		
11	Are your employees working in an environment that includes Third Party Operators (lumpers)? If yes, please provide details.	Yes	No
12	Do you have designated traffic patterns/areas for forklifts only?	Yes	No
13	Are temporary employees allowed to operate forklifts?	Yes	No
14a	Who is responsible for training temporary employees?		
15	Number of propane/diesel forklifts		Number of electric forklifts
16	Are forklifts used to lift employees for any reason? (Maintenance, elevated work, etc.)	Yes	No
16a	If Yes, is a cage/basket that meets OSHA requirements used?	Yes	No
17	Does insured use order pickers?	Yes	No
17A	If so, are harnesses with retractable lanyards used?	Yes	No
Name and contact information of person who is responsible for forklift operations			
Name:		Phone:	
Email:			
Name and contact of information person who is responsible for completing this document			
Name:		Phone	
Email:			
Signature:		Date:	