

**YOUR NAME****LICENSE NUMBER - LCO**

**EXPERIENCE LOG FOR RENEWAL PURPOSES ONLY**  
**YOU MAY NOT REPORT THE SAME EXPERIENCE SUBMITTED FOR PREVIOUS RENEWAL**  
**EACH MAKE AND MODEL CRANE HOURS MUST BE LISTED SEPARATELY**  
**ALL BOXES MUST BE COMPLETED**

<b>DATES OF WORK ASSIGNMENT</b>	<b>NAME/ADDRESS OF EMPLOYER</b>	<b>ARE YOU AN EMPLOYEE OR INDEP CONTR</b>	<b>PROJECT LOCATION (CITY &amp; STATE)</b>	<b>MAKE &amp; MODEL OF CRANE</b>	<b>INCIDENT (CIRCLE ONE)</b>	<b>INJURY REPORT (CIRCLE ONE)</b>	<b>PROJECT HOURS (OPERATING)</b>
					YES - IF SO, INCIDENT DATE:  NO	YES - IF SO, INCIDENT DATE:  NO	
					YES - IF SO, INCIDENT DATE:  NO	YES - IF SO, INCIDENT DATE:  NO	
					YES - IF SO, INCIDENT DATE:  NO	YES - IF SO, INCIDENT DATE:  NO	
					YES - IF SO, INCIDENT DATE:  NO	YES - IF SO, INCIDENT DATE:  NO	
					YES - IF SO, INCIDENT DATE:  NO	YES - IF SO, INCIDENT DATE:  NO	
					YES - IF SO, INCIDENT DATE:  NO	YES - IF SO, INCIDENT DATE:  NO	

**MINIMUM OF 1,600 HOURS OF EXPERIENCE DURING THE PRECEDING TWO YEARS OF YOUR EXPIRATION DATE**

**THIS FORM IS TO BE USED ONLY IF YOU HAVE OBTAINED YOUR PENNSYLVANIA LCO BY EXPERIENCE AND HAVE NOT YET BEEN NATIONALLY CERTIFIED.**