

**Appendix 3 - Crane Operation Approval**

**CRANE OPERATION APPROVAL**

**Advice from Crane Operator**

Name: \_\_\_\_\_ Company: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Contact Mobile: \_\_\_\_\_

Crane Location: \_\_\_\_\_

Ground Level AHD (RL): \_\_\_\_\_ Crane Operating Height (AGL): \_\_\_\_\_

Crane Operating Height (mAHD): \_\_\_\_\_

Duration, Date/time: from \_\_\_\_\_ to \_\_\_\_\_

Contact with driver available: Yes/No      Ph: \_\_\_\_\_

Crane Boom Painted (Yes/No/Colour): \_\_\_\_\_

Hazard LGTS at top of boom (Yes/No): \_\_\_\_\_

**OLS Check**

Surface: \_\_\_\_\_

Infringement: Yes/No      Amount (m) \_\_\_\_\_

Advice from CASA: \_\_\_\_\_ Advice from ASA: \_\_\_\_\_

NOTAM required:      Yes/No

Attendant required:      Yes/No

Other arrangement: \_\_\_\_\_

Written approval required:      Yes/No

Approval authorised by \_\_\_\_\_

Signature

Request rejected by \_\_\_\_\_

Signature

**Crane Approval No.:** \_\_\_\_\_

**Airport Safety Officer to be advised of fill known cranes.**

Copy: Airport Safety Officer and Air Traffic Control Tower