

# Crane Notification Form

Crane Operator Company: \_\_\_\_\_

Crane Operator Name: \_\_\_\_\_

Crane Operator Phone Number: \_\_\_\_\_

## Crane Operating Location & Information

Start Date: \_\_\_\_\_ Start Time: \_\_\_\_\_

End Date: \_\_\_\_\_ End Time: \_\_\_\_\_

Address of Crane Operation  
Or Closest Street Intersection: \_\_\_\_\_

Latitude: \_\_\_\_° \_\_\_\_' \_\_\_\_" N Longitude: \_\_\_\_° \_\_\_\_' \_\_\_\_" W

Crane Tip Operating Height: \_\_\_\_\_ AGL / \_\_\_\_\_ MSL

Will Crane Be Flagged: Y / N Will Crane Be Lighted: Y / N

Will Crane Be Lighted: / Will Crane Be Erected /  
During Hours of Darkness:

Was an FAA Airspace  
Study Done?: /

Airspace Study ASO#: \_\_\_\_\_

Special Notes: