

Temporary Crane/Obstacle Notification Form and Assessment

1. CRANE/OBSTACLE LOCATION (USE STREET ADDRESS and/or OR GPS LOCATION)			
2. APPLICANT CONTACT DETAILS			
Name (Company and direct contact):			
Office Number:		Mobile Number:	
3. CRANE OR OBSTACLE DETAILS			
Total height of Boom (extended):			
Operating Date(s):			
Operating Time (from, to):			
Communications method with Crane Operator:	Direct – Mobile number:		
	Indirect – Contact number:		
4. COMPANY OR BUILDERS DETAILS			
Company Name:			
Contact Details:	Name:		
	Office Number:		
	Mobile Number:		
APPLICANTS SIGNATURE		DATE	Click or tap to enter a date.
5. OBSTACLE PENETRATIONS			
<p><u>Terms and conditions</u></p> <p>Where a crane penetrates or comes within the proximity of the Obstacle Limitation Surface (OLS) the following will apply</p> <p>Lighting: The crane must be fitted with appropriate obstacle lighting in accordance with MOS Part 139, Subsection 9.4. This may include red medium-intensity steady-burning lights.</p> <p>Markings: Consideration should also be given to the crane being marked in alternating red and white bands of colour in accordance with section 8.110 of MOS139.</p> <p>Crane Lowering: Where feasible, the crane must be lowered below the OLS or its minimum safe height when not in use.</p> <p>By signing below you agree with the above statement and will follow the terms and conditions should your crane/obstacle penetrate the OLS</p>			
APPLICANTS SIGNATURE		DATE	Click or tap to enter a date.
<p><u>NOTE:</u> Complete required details and email to: operations@phia.com.au and aos@phia.com.au Please contact the Duty Airport Operations Officer on 0417108850 to confirm receipt.</p>			

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OFFICE USE ONLY			
1. Bearing & Distance from the ARP			
	Metres	Feet	
1. Maximum RL permitted at site			(e.g. IHS – 52.5m)
2. Ground Height (AHD)			(e.g. 11m)
3. Maximum Height AGL			(e.g. 44m)
4. Maximum Height of Obstacle (2+3)			(e.g. 55m)
5. OLS Penetration (4 minus 1)			(e.g. 2.5m) (also convert to feet)
OLS Infringement: NO <input type="checkbox"/> YES <input type="checkbox"/> Transitional <input type="checkbox"/> Inner Horizontal <input type="checkbox"/> Outer <input type="checkbox"/> Conical <input type="checkbox"/> PANS OPS <input type="checkbox"/>			
COMPLIANCE ACTIONS FOR ANY OBSTACLE PENETRATION:			
NOTAM	NO <input type="checkbox"/> YES <input type="checkbox"/>	CASA Assessment	NO <input type="checkbox"/> YES <input type="checkbox"/>
Airservices Assessment	NO <input type="checkbox"/> YES <input type="checkbox"/>		
APPROVALS			
Detail/Approval provided to applicant (including any restrictions): YES <input type="checkbox"/> NO <input type="checkbox"/>			
PHIA ASSESSING OFFICER		DATE	Click or tap to enter a date.
SIGNATURE & NAME			
NOTE: Timings and Dates MUST be strictly adhered to. ANY variation to timings or dates will require a new application to be submitted before any further approval may be granted.			