

**Purpose of form:**

This form is the Crane Notice (CN) application to obtain an on-site inspection by a Cranes and Derricks inspector or Professional Engineer (PE). This application must be filed by a New York State PE.

Note: Please file 4 copies (1 master with original signatures and seal and 3 duplicates).

**1A Application Type**

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- Check the application type.
- Provide CN number on the top right corner of the form for renewal and amendment.

**1B Equipment Type**

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- Check the equipment type.

**2 Location Information**

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- Provide the borough, block, lot and the address or special place name of where the equipment will be used.
- Provide the Job number related to the work at this location.

**3A Crane / Derrick / Mast Climber / Pile Driver Information**

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- Provide CD number, serial number and expiration date for each device.

**3B Configuration / Phase Information**

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- Provide the maximum length of the boom, jib and mast for each configuration / phase.

**4 Applicant Information**

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- Provide the name, title, PE license number as issued by New York State, business name, address, phone number and E-Mail of the applicant.

**5 Equipment User Information**

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- Provide the name and the title of the individual who will operate the equipment. If this person is not known, provide the name and title of the person who will take responsibility for this application (i.e., sign the application) on behalf of the equipment user.
- Provide the business name, address, phone number and E-Mail of the equipment user.

**6A Applicant's Statement**

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- The applicant must print name, sign and date the application. The applicant must place PE seal in the designated area.

**6B Equipment User's Statement**

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- The equipment user must sign and date the application.

**6C Crane Safety Coordinator's Statement**

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- If lifting of loads will occur over sidewalks or roadways, provide the name, title, license number (PE number as issued by New York State if the Site Safety Coordinator is a PE—otherwise leave blank), address and phone number of Site Safety Coordinator.
- The Site Safety Coordinator must sign and date the application.

**6D Mast Climber Supervisor's Statement**

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- The mast climber supervisor must sign and date the application.