

6 AUTHORISATION PERMIT FOR CRANES AND OTHER TALL CONSTRUCTION EQUIPMENT

SECTION 1: TO BE COMPLETED BY APPLICANT

CRANE DETAILS			
Crane / Equipment Registration Number		Click or tap here to enter text.	
Hire Company		Click or tap here to enter text.	
Type of Crane or Equipment (e.g. mobile/fixed/tower)		Click or tap here to enter text.	
Maximum Operational <u>Working</u> Height of Jib Above Ground Level (m)		Click or tap here to enter text.	
Radius of Crane		Click or tap here to enter text.	
Location of Crane or Equipment (latitude and longitude)		Click or tap here to enter text.	
Elevation of Site (Above Ordnance Datum, i.e. mean sea level)		Click or tap here to enter text.	
Full Site Address (including postcode)		Click or tap here to enter text.	
Crane Operator/Lifting Supervisor Contact Name		Click or tap here to enter text.	
Crane Operator/Lifting Supervisor Contact Phone Number		Click or tap here to enter text.	
Date(s) of Operation (inclusive)		Click or tap here to enter text.	
Times of Operation (inclusive)		Click or tap here to enter text.	
<p><i>I certify that the information given is accurate and will immediately inform Cambridge Airport Operations of any changes to the above information. I understand that if any part of the construction equipment infringes the airport's Obstacle Limitation Surfaces (OLS) that there may be additional charges to cover the cost of an impact study and mitigation report.</i></p>			
Applicant's Name	Click or tap here to enter text.	Contact Phone Number	Click or tap here to enter text.
Email Address	Click or tap here to enter text.	Company	Click or tap here to enter text.

INVOICING DETAILS	
Company Name	Click or tap here to enter text.
Invoicing Address	Click or tap here to enter text.
Company Registration Number	Click or tap here to enter text.
VAT Number	Click or tap here to enter text.
Contact Name	Click or tap here to enter text.
Contact Phone Number	Click or tap here to enter text.
Email Address	Click or tap here to enter text.
Type of Permit <i>All prices ex VAT</i>	<input type="checkbox"/> Standard Crane Permit - £210
	<input type="checkbox"/> Crane Permit (within 48 hours) - £350
	<input type="checkbox"/> Crane Permit (within 24 hours) - £490
	<input type="checkbox"/> Site-Wide Crane Permit (more than two locations) – POA
	<input type="checkbox"/> Permit Extension - £140
Permits requiring further assessment by our approved Instrument Flight Procedure Designer this will incur an additional cost, which will be Provided on Application.	

Email completed form to: airport.safeguarding@cambridgeairport.com

Cambridge Airport will endeavour to assess all applications as soon as possible, however it is recommended that applicant's apply at least three weeks prior to the planned start date. This Permit is only valid once Section 2 has been completed and signed by Cambridge Airport Operations. Any questions regarding the operations of cranes/tall equipment on or close to Cambridge Airport, and the completion of this form should be addressed to the Airport Duty Manager on 01223 373535.

SECTION 2: TO BE COMPLETED BY AIRPORT OPERATIONS

CONDITIONS PLACED ON OPERATION			
Minimum 32 candela steady red obstacle light(s) (Low-intensity Type B (less than 45m AGL)	YES	<input type="checkbox"/>	NO <input type="checkbox"/>
2000 candela steady red obstacle light(s) (Medium-intensity Type B or C (45 - 150m AGL)	YES	<input type="checkbox"/>	NO <input type="checkbox"/>
Airport Operations to be notified before operations commence	YES	<input type="checkbox"/>	NO <input type="checkbox"/>
Crane operation subject to runway Choose an item. being in use?	YES	<input type="checkbox"/>	NO <input type="checkbox"/>
Other conditions placed on operation:			

SAFEGUARDING DETAILS	
Crane permit number	Click or tap here to enter text.
Operation subject to low visibility procedures or cloud ceiling	YES <input type="checkbox"/> NO <input type="checkbox"/>
OLS penetration?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Applicable OLS	Click or tap here to enter text.
ATS Consultation	YES <input type="checkbox"/> NO <input type="checkbox"/>
ATS Comments	Click or tap here to enter text.
ATS Sign Off	Click or tap here to enter text.
CAA Consultation (IFP Safeguarding)	YES <input type="checkbox"/> NO <input type="checkbox"/>
NOTAM Required?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Times of Operation	Click or tap here to enter text.
Schedule	Click or tap here to enter text.
Max Height AGL m/ft	Click or tap here to enter text.
Max Height AMSL m/ft	Click or tap here to enter text.
NOTAM Reference	Click or tap here to enter text.
Other notes/safeguarding details:	
Click or tap here to enter text.	

AUTHORISED BY			
Name	Click or tap here to enter text.	Date	Click or tap here to enter text.