



TOWN of GREENBURGH

BUILDING DEPARTMENT

177 Hillside Avenue, Greenburgh, New York 10607

(914) 989-1560

Fax (914) 993-1570

www.GreenburghNY.com

email: building@greenburghny.com

Fee: \$100

APPLICATION # _____

BUILDING PERMIT FOR CRANE OPERATION

You may use this form to apply to operate any type of crane, including scissor lifts, booms, and cherry pickers. Applications must be submitted a minimum of 2 working days excluding weekends and public holidays prior to the proposed work date. Traffic / pedestrian control plans may be required if accesses are affected by the proposed crane placement. Submit copies of: (1) New York State Department of Labor Crane Certificate; (2) Certificate of Liability Insurance; (3) Certificate of New York State Worker's Compensation Insurance; (4) Certificate of New York State Disability Insurance; (5) Crane inspection report

APPLICANT INFORMATION

Name of Applicant: _____ Telephone # _____

Street Address, City and Zip: _____

Telephone Number: _____ Fax Number: _____

E-mail Address: _____

Crane Operator : _____ Telephone # _____

N.Y.S. Department of Labor Crane Operator Certificate of Competence #: _____ Expiration: _____

SITE INFORMATION

Location where crane is to be operated: _____

Street closure required? _____ If yes, contact Greenburgh Police Department 989-1700 for authorization

Purpose of Crane: _____

Estimate number of days crane is to be used: _____ Work Dates: _____ Start time: _____ End Time: _____

Type of Crane: Mobile Crane Cherry Picker Concrete Boom Scissor Lift Boom Lift

Make of Crane: _____ Date of Crane Inspection: _____

I declare that all the information that I have provided is true and correct.

Printed Name

Date

Signature