

**BOROUGH OF RED BANK – COUNTY OF MONMOUTH
APPLICATION FOR CRANE PERMIT**

(For Office Use)

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APPLICATION # _____

Approved _____ Denied _____

FEE: _____ CHECK # _____ CASH _____

ZONE: _____

NAME OF APPLICANT(S): _____ DATE: _____

MAILING ADDRESS: _____ PHONE: _____

_____ EMAIL: _____

NAME/ADDRESS OF CRANE'S OPEATOR: _____

DEVELOPMENT ADDRESS: _____ BLOCK: _____ LOT(S): _____

OWNER'S NAME/ADDRESS:

DESCRIBE PROPOSED CRANE USE:

CHECK LIST OF ATTACHMENTS:

- ___ VALID DRIVER'S LICENSE BY NJ DEPT. OF LABOR
- ___ PROOF OPERATOR SUBMITS TO RANDOM DRUG TEST
- ___ CURRENT PROOF OF CRANE INSPECTION
- ___ CONSTRUCTION PERMIT
- ___ NJ CRANE LICENSE
- ___ PROOF OF INSURANCE
- ___ COMPLETION OF SIGNAL PERSON QUALIFICATION OR CERTIFICATION COURSE

- ___ COPY OF OPERATOR'S CERTIFICATION
- ___ CRANE LIFT CAPACITY
- ___ ENGINEER-CERTIFIED GEOTECHNICAL PLAN FOR SITE
- ___ CERTIFICATE OF CONTINUING OCCUPANCY
- ___ CURRENT MEDICAL EXAMINER'S CARD
- ___ ALL PERMITS REQUIRED BY STATE AND FEDERAL LAW

To the best of my knowledge, the information contained on this application is correct. I grant permission to the Borough of Red Bank and their Agents to come onto the subject property to inspect and take photographs for purposes relating to this application.

Applicant's Name (Please Print)

Property Owner's Name (Please Print)

Applicant's Signature

Property Owner's Signature