

## Approval for Entry of all Mobile Cranes in PCFC areas

(APPLICATION FOR ENTRY OF ALL MOBILE CRANES IN PCFC AREAS)			
COMPANY NAME :			
LICENSE NO. :		ISSUED FROM :	
PO BOX :		PHONE NO :	FAX NO :
EMAIL ADDRESS :			
MANAGER'S NAME :			
DESCRIPTION OF THE CRANE			
MAKE :			
REGISTRATION NO. :		REGISTRATION EXPIRATION :	
TESTED BY :		TEST DATE :	
SWL :			
REQUESTING FOR : <input type="checkbox"/> THREE/ <input type="checkbox"/> TWO / <input type="checkbox"/> ONE MONTH (S) PERMIT			
DETAILS OF THE OPERATOR			
NAME OF THE OPERATOR :			
OPERATOR LICENSE NO. :		VALID UNTIL :	
ISSUING AUTHORITY :			
ALTERNATE OPERATOR (if required) :			
OPERATOR LICENSE NO. :		VALID UNTIL :	
ISSUING AUTHORITY :			
DOCUMENTS TO BE ATTACHED			
A)	PAYMENT RECEIPT		<input type="checkbox"/>
B)	TRADE LICENCE COPY		<input type="checkbox"/>
C)	COPY OF VALID LOAD TEST CERTIFICATE OF THE CRANE		<input type="checkbox"/>
D)	OPERATOR'S LICENSE COPY (INCLUDING ALTERNATE OPERATOR IF REQUIRED)		<input type="checkbox"/>
E)	COPY OF CRANE RTA REGISTRATION		<input type="checkbox"/>