



ACAA
Allegheny County
Airport Authority

EQUIPMENT/ CRANE AIRSPACING REQUEST FORM

Please complete and submit this form a minimum of three (3) business days prior to the requested date(s). This form must be submitted by email to the Allegheny County Airport Authority for review. No work may occur until written authorization has been received from the Allegheny County Airport Authority. Please email requests to aebaling@mec4cm.com and keffenberger@mec4cm.com and CC: twoodrow@flypittsburgh.com, tpetito@flypittsburgh.com, nschubel@flypittsburgh.com, and jbezek@flypittsburgh.com.

Contact Information: _____ Phone Number: _____
 _____ Email Address: _____

Date(s) Requested: _____ Time(s) Requested: _____

Work Site Address: _____ Site Emergency Contact: _____
 _____ Cell Phone Number: _____

Crane/ Equipment Location: Latitude _____ Longitude _____
(Example: N40°21'26.32") (Example: W80°14'11.07")

Crane/ Equipment Information:

Crane/ Equipment Ground Elevation: _____

Maximum Boom Height: _____ Working Boom Height: _____

Description of Work: _____

