

MIAMI-DADE AVIATION DEPARTMENT, AVIATION PLANNING DIVISION
MDAD PERMISSIBLE CRANE/EQUIPMENT HEIGHT DETERMINATION



Please allow a minimum of 7 business days to process this request after the payment has been received. A copy of this approval must be maintained on the job site.

Nearest Airport:					Today's Date:	
Miami International Airport (MIA)	Miami-Opa locka Executive Airport (OPF)	Miami Executive Airport (TMB)	Homestead General Aviation Airport (X51)	Dade-Collier Training & Transition (TNT)		
Requestor:			Telephone:	Fax:		
Requestor's Address:			Job Site Location:			
Crane/Equipment Company:			Nighttime Operation Required?			
			YES		NO	
Construction Foreman & 24-Hour Phone:			Crane/Equipment operating hours:			
			FROM:		TO:	
			Project Name:			
E-mail:			Date of Arrival:		Date of Departure:	

GPS Coordinates of Crane(s)/Equipment(s) specified in NAD 83 (North American Datum 1983) in degrees, minutes and (to a hundredth of a) second format (Horizontal Datum). Site (Ground) elev. in feet Above Mean Sea Level (AMSL) using North American Vertical Datum (NAVD 88). Max Boom Height in feet Above Ground Level (AGL). Total Max boom height in feet Above Mean Sea Level (AMSL). First point: \$360, additional points: \$45 each.

Pt. No.	Latitude	Longitude	Ground El. + Boom Ht. = Total El.	FAA ASN No.*	Expires
_____	_____° _____' _____"	_____° _____' _____"	_____ + _____ = _____	_____	_____ -OE _____
_____	_____° _____' _____"	_____° _____' _____"	_____ + _____ = _____	_____	_____ -OE _____
_____	_____° _____' _____"	_____° _____' _____"	_____ + _____ = _____	_____	_____ -OE _____
_____	_____° _____' _____"	_____° _____' _____"	_____ + _____ = _____	_____	_____ -OE _____

*If any crane or temporary structure meets the FAA notification criteria set forth in Title 14 of the Code of Federal Regulations, Part 77, a valid "Determination of No Hazard" issued by the FAA must be submitted to MDAD. If you are required to file with the FAA, please wait until you receive their determination(s) before submitting this form. If you have filed with the FAA, you are required to submit the determination(s) along with this form.

The requestor and/or the crane operator of this MDAD-Issued Permissible Crane Height Determination hereby acknowledges that data provided in this form to be accurate and agrees not to exceed the maximum boom height as deemed permissible by MDAD. The requestor and/or crane operator further acknowledges that failure to comply will result in authorization being withdrawn as enforced by MDAD's Airside Operation Division. Additionally, it is the responsibility of the requestor and/or crane operator to coordinate crane operations with the applicable airport manager.

MDAD USE ONLY PLEASE DO NOT WRITE BELOW THIS LINE

One Point Analysis (\$360) Code = MIACRN		_____ Additional Points (\$45 Each Point) Code = MIACOO	
Crane Determination Time Extension Request (\$90) Code = MIACHE			
Total Points Submitted: _____		Total Fee: _____	
Credit Card Approval Code: _____		Check No.: _____	
MDAD Determination No.: _____		MAX BOOM HEIGHT ALLOWABLE	
DN: _____		Feet AMSL	
CRANE DISTANCE TO NEAREST RUNWAY: (In Feet)		NOTAM ISSUED AS REQUIRED BY AIRPORT MANAGER	
_____ (Feet) Nearest RWY: _____ Direction: _____		(FOR GAA ONLY) YES NO	
Does Applicant Need to File FAA Form 7460-1?		FAA Notice of Proposed Construction (Form 7460-1) Filed?	
YES NO		YES NO	
COMMENTS:			
BECAUSE THE REQUESTED CRANE HEIGHT IS ABOVE _____ FT. AMSL YOU MUST FILE WITH THE FAA USING FORM 7460-1 ELECTRONICALLY VIA THIS WEBSITE: https://oeaaa.faa.gov/oeaaa/external/portal.jsp		COORDINATE WITH THE APPROPRIATE AIRPORT MANAGER & FAA ATCT (CHECKED BELOW) BEFORE BRINGING THE BOOM UP	
ALLOW A MINIMUM OF 4 WEEKS FOR FAA PROCESSING AND APPROVAL		ALL CRANES MUST BE LOWERED AT NIGHT AND DURING INCLEMENT WEATHER	
FOLLOW AND ABIDE BY ALL CONDITIONS AS SET FORTH IN FAA AERONAUTICAL STUDY REFERENCED ABOVE		FOR NIGHT OR ALL WEATHER OPERATION, CRANE MUST BE LIGHTED AND BE APPROVED BY AIRSIDE OPS AND ATCT	
ALL CRANES MUST BE MARKED WITH ORANGE & CHECKERED FLAG		MDAD PLANNING STAFF VERIFIED RECEIPT OF PAYMENT _____	
		MDAD SPONSORED PROJECT	
PREPARED BY: _____			
REVIEWED BY MDAD AVIATION PLANNING:		Signature: _____ Date: _____	

APPROVED BY MDAD AIRSIDE OPERATIONS:			
PRIOR TO RAISING THE CRANE BOOM, CONTACT THE SELCETED AIRPORT MANAGER:		Signature: _____ Date: _____	
MIAMI INTERNATIONAL AIRPORT Airside Operations Ms. Michelle Cardona: 645-214-6093 Mr. Adrian X. Diaz: 305-876-7674	MIAMI-OPA LOCKA EXEC. Airside Operations Af">YfglYriAW Uf`UbY. " \$) !, * 9!1662	MIAMI EXECUTIVE AIRPORT Airside Operations Ms. Heidi Anthony: 305-869-1702	HOMESTEAD GENERAL AVIATION & DADE-COLLIER TRAINING AND TRANSITION AIRPORT Airside Operations Mr. Joseph Kinnebrew: 305-876-7484

A COPY OF OF THIS APPROVED FORM MUST BE MAINTAINED AT THE JOB SITE

FAA Air Traffic Control Tower (ATCT):			
MIA ATCT Mr. Luis Colon 305-869-5403	OPF ATCT Mr. Brian Wells 305-869-1601	TMB ATCT Ms. Fior Torres 305-256-0632	Rev. June 18 2026