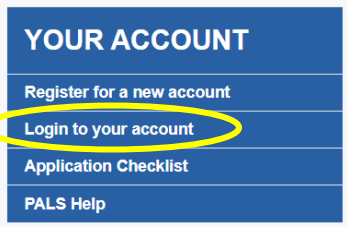
2026 Crane Renewal Instructions

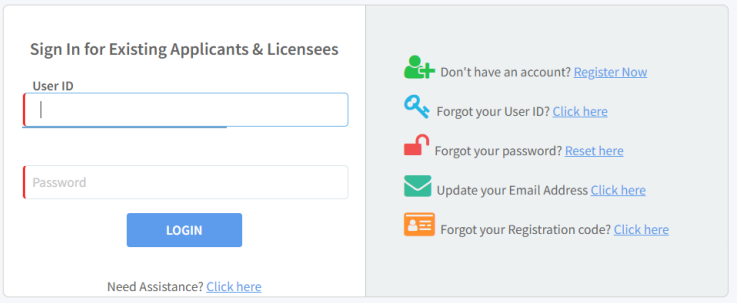
Five Easy Steps

Step #1 – LOG IN TO YOUR ACCOUNT

Go to www.pals.pa.gov and log into your account (left side):

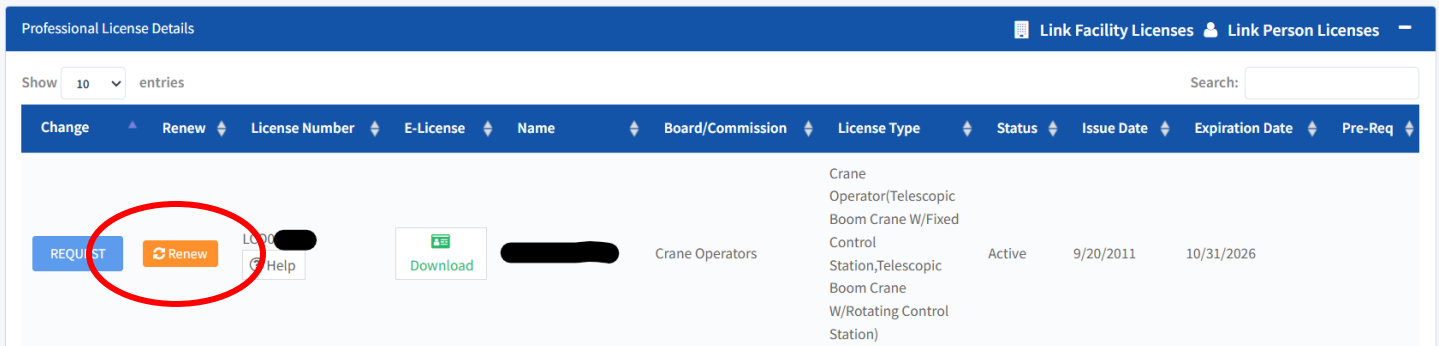


Type in your User ID and Password *(If you forgot your User ID or Password, please use the right column to retrieve this information)*:

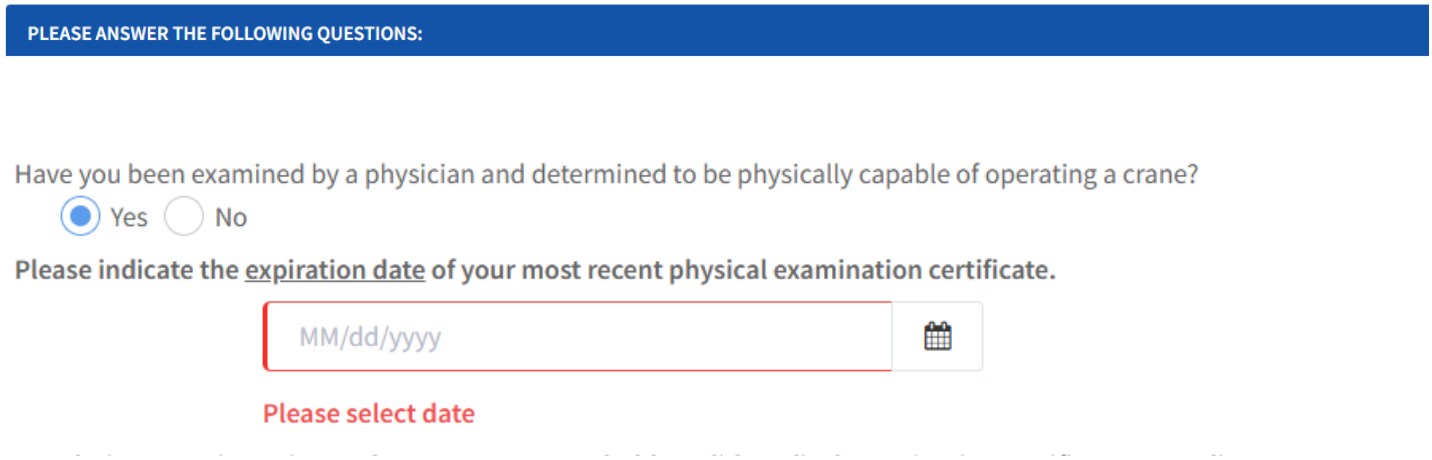


Step #2 – ACCESS RENEWAL AND ANSWER QUESTIONS

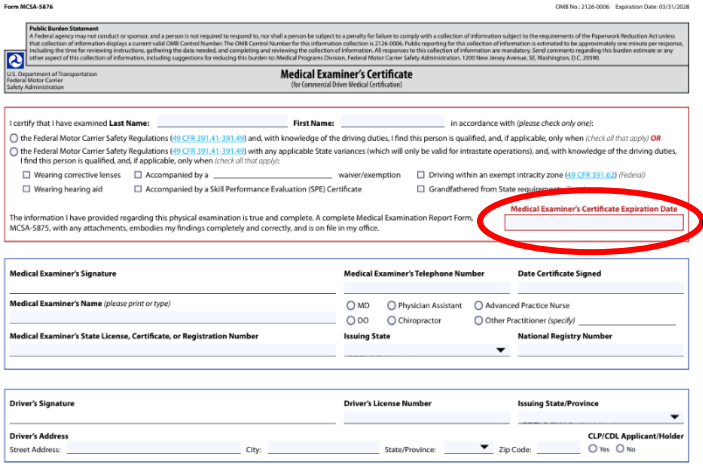
On your Dashboard, click on the RENEW button, located next to your license number, under the Professional License Details banner:



Your online renewal application will open and populate your personal information at the top. Scroll down to the questions.



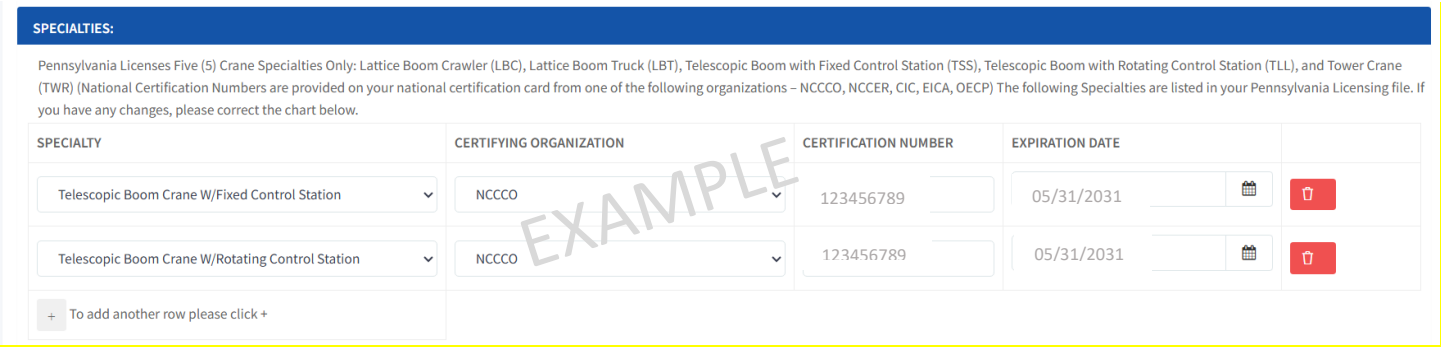
Have you been examined by a physician and determined to be physically capable of operating a crane?



Enter This Expiration Date onto the Renewal Application for the above question.

Step #3 –REVIEW SPECIALTIES

***Please review the specialties listed within your renewal application.**



***If the information listed is CORRECT, continue to the next section on the renewal (Step 4).**

*If the information listed is NOT CORRECT, please follow these instructions:

Incorrect Information Listed	Instructions to Correct
Specialties	To **ADD** a Specialty – Click on the '+' sign located under the grid to add a row. Fill in the information for your new specialty. ***You must also follow the instructions below*.*** To **REMOVE** a Specialty – Click on the red trash can icon to Delete the specialty. ***You must also follow the instruction below*.*** **Go to your dashboard and click on the **REQUEST** button next to your license number. Select **Add/Remove Specialties**. **Enter the Specialties that you ARE certified in** and upload your medical exam card. Pay the application fee ($70 to add 1-4 specialties/$5 to remove 1-4 specialties)*
National Certifying Organization or Certification Number	Correct the grid above and list the correct national organization or Certification Number for the specialty. Email **ra-crane_operators@pa.gov** with updated certification card.
Expiration Date – Incorrect or Showing Expired Date *(Prior to 11/01/2026)*	Correct the grid above and list the correct expiration date for the specialty. Email **ra-crane_operators@pa.gov** with updated certification card.

For NCCCO Holders:

National Certification ID #

Check website for Expiration Date(s) of Specialties

(For all other National Certifying Organizations – Your certification card should contain your certification ID number. If needed, please contact your organization to obtain your Certification ID and correct Expiration Dates of your Specialties.)

Step #4 – COMPLETE REMAINING AREAS

PA VETERANS REGISTRY:

Have you served in the U.S. Armed Forces?

( ) Yes ( ) No

ACKNOWLEDGEMENT OF DUTY TO SELF-REPORT DISCIPLINARY CONDUCT AND CERTAIN CRIMINAL ACTIVITY:

I hereby acknowledge that in addition to any existing reporting requirement required by a specific board or commission, I am REQUIRED pursuant to Act 6 of 2018 to NOTIFY the Bureau of Professional and Occupational Affairs WITHIN 30 DAYS of the occurrence of any of the following:

(1) A disciplinary action taken against me by a licensing board or agency in another jurisdiction;

(2) A finding or verdict of guilt, an admission of guilt, a plea of nolo contendere, probation without verdict, a disposition in lieu of trial or an Accelerated Rehabilitative Disposition (ARD) of any felony or misdemeanor offense in a criminal proceeding. **I further acknowledge that failure to comply with these mandatory reporting requirements may subject me to disciplinary action by the Board.** I acknowledge my understanding that to self-report a disciplinary action or criminal matter as set forth above, I may log in to the Pennsylvania Licensing System (PALS) at www.pals.tfp.pa.gov and select "Mandatory Reporting by Licensee" under the heading "Your Licenses."

☐ I CONFIRM THAT I HAVE READ AND AGREE TO THE TERMS ABOVE.

Signature: Please type your name.

Date: 8/18/2026

VERIFICATION STATEMENT

NOTICE: Disclosing your Social Security Number on this application is mandatory in order for the State Boards/Commissions to comply with the requirements of the Federal Social Security Act pertaining to Child Support Enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa. C.S. § 4304.1(a). At the request of the Department of Human Services, the licensing boards and commissions must provide to the Department of Human Services information prescribed by the Department of Human Services about the licensee, including the social security number. Additionally, if applicable, Social Security Numbers are required in order for the Board/Commission to comply with the reporting requirements of the U.S. Department of Health and Human Services, National Practitioner Data Bank.

I verify that this application is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information under 18 Pa. C.S. Section 4911. I verify that the statements in this application are true and correct to the best of my knowledge, information and belief. I understand that false statements are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities) and may result in the suspension, revocation or denial of my license, certificate, permit or registration.

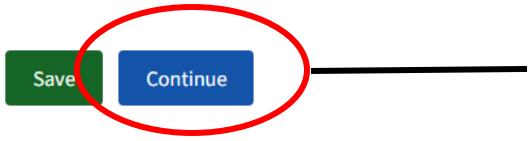
☐ I CONFIRM THAT I HAVE READ AND AGREE TO THE TERMS ABOVE.

Signature: Please type your name.

Date: 8/18/2026

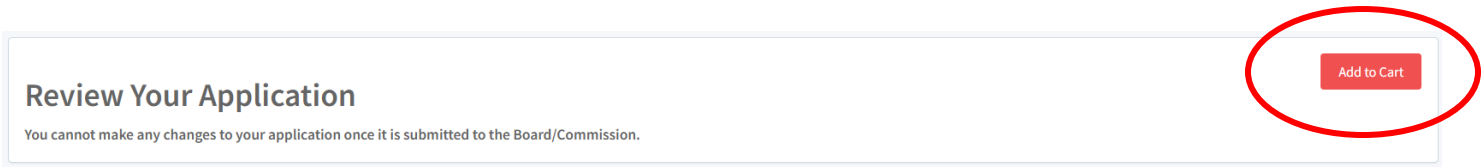
Save | Continue

Step #5 – CONTINUE, REVIEW, CHECK OUT AND PAY

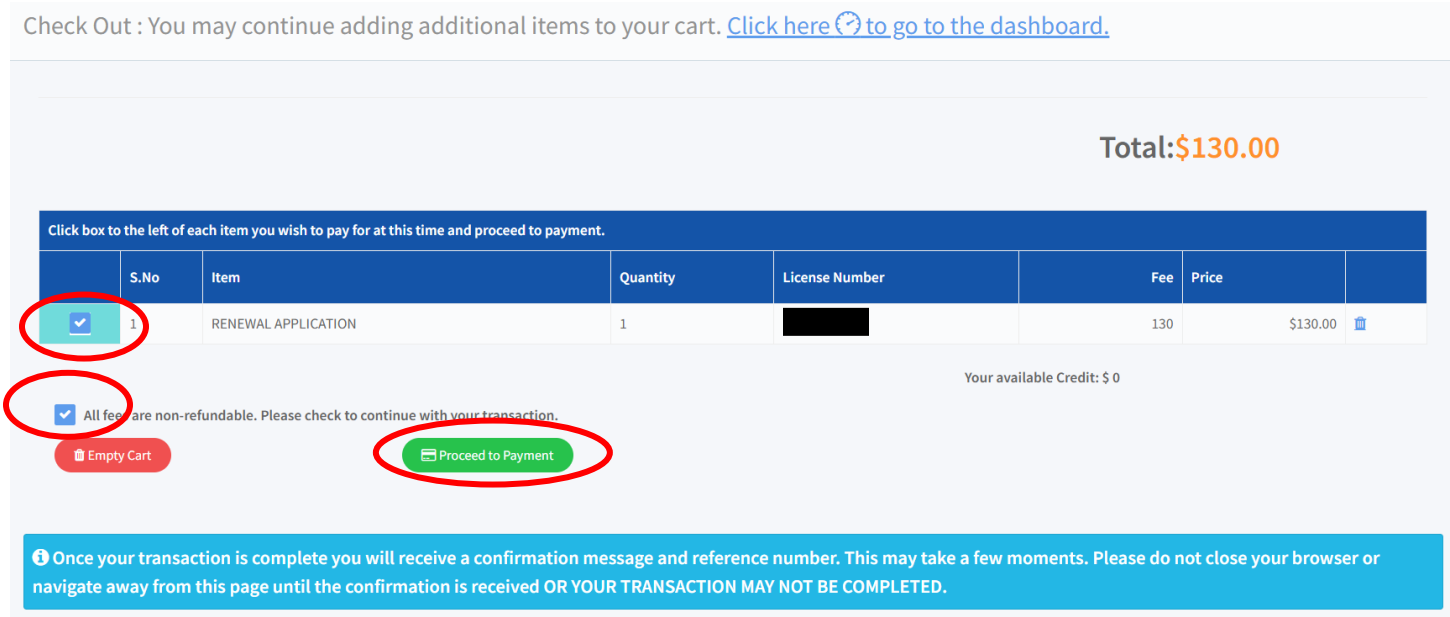


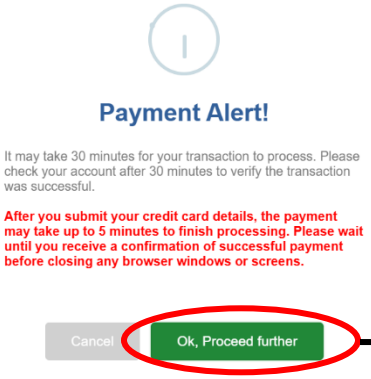
Click CONTINUE to get to the Review Page

On the next page, review your application and click on the red ADD TO CART button:

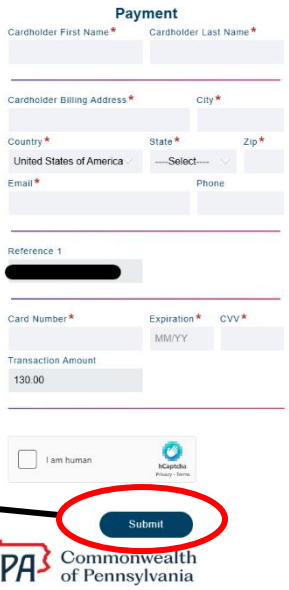


Check the box in the 'teal' shaded area to select what you are paying for. Check the box that you agree that all fees are non-refundable. Click on the PROCEED TO PAYMENT green box.





A Payment Alert will pop up. Click 'Ok, Proceed further'



Complete the Payment form and click on 'Submit'

When you are on your Payment Confirmation Page, your renewal application will be queued for review. Please allow 5-7 business days for your renewal application to be processed.

Your renewal application will show under the Activities banner on your dashboard. Under the 'Description' column, it may show that Items are not received. These will be manually changed when your application is reviewed.

REMINDER:

If your National Certification Expiration date of any Specialty will expire between 11/01/2026 to 10/31/2028: This is a reminder that you will need to provide the Board Office with your national renewal certificates when you recertify your specialties with your national certifying organization at that time. **This is mandated by Pennsylvania Laws and Regulations, and it is YOUR responsibility and NOT the responsibility of your national certifying organization to provide this information to the Board.** Your National Certifications must be up to date on your file with the Pennsylvania Board Office accordingly.

If the Expiration date of your Physician's Medical Certificate will expire between 11/01/2026 to 10/31/2028: Regulations require a Licensed Crane Operator to always hold a valid medical examination certificate. This is a reminder that you will need to provide the Board Office with your updated medical examination certificate to keep your file up to date once you have been examined and a new Medical Examination Certificate is received. **This is mandated by Pennsylvania Laws and Regulations, and it is YOUR responsibility to provide this information to the Board.**