APPLICATION FOR TEMPORARY URGENT TRAFFIC RESTRICTIONS

(FOR UP TO 5 DAYS OR UP TO 21 DAYS IN THE EVENT OF AN EMERGENCY)

Guidance for Temporary Traffic restriction

Please read carefully and sign below before completing the form. The applicant must:

(a) Submit the application form after seeking permission from the Street Works Manager
(b) Meet the council’s charges for processing the restrictions (detailed below)
(c) Maintain pedestrian access to frontages at all times
(d) Provide, erect and maintain all signs required to give effect to the Order, the type and siting of which must be approved by SBC
(e) Give a minimum of a week notice to Streetworks before the expiry of restriction if an extension is required
(f) Not commence the restriction(s) (by placing signs) until authorisation has been received from Streetworks and the legal administration process has been completed
(g) Notify all parties on the affected length(s) of road by letter, as soon as possible before the restriction(s) commence.
(h) NOT use the restricted length(s) of road for the general parking of vehicles. A vehicle may only enter and remain in the restricted length(s) of road if doing so is necessary to the works (e.g. delivery of materials)
(i) (Road closures only) erect and maintain advance works signs as soon as possible prior to the closure. Failure to do so may delay the start of the closure.
(j) Ensure that the provision, operation and maintenance of all signs, lighting and guarding of the works is in accordance with the requirements of the New Roads and Street Works Act 1991, the Road Traffic Regulation Act 1984, Safety at Street Works and Road Work Code of Practice and in conjunction with Chapter 8 of the current Traffic Manual.
(k) Ensure that the supervisor of the works is a qualified person pursuant to Section 67 of the New Roads and Street Works Act 1991
(l) Agree that Swindon Borough Council may distribute to third parties and use publicly any of the information provided within these forms

Charges

(1) The charge for the temporary restriction is £276.00. This consists of office time in assessing the restriction, legal administration costs and a processing fee.

Charges are made in accordance with the Road Traffic Regulation Act 1984 and will be subject to periodic review by HAUC.

(2) Should the closure / restriction remain in force for a period in excess of that requested; a further charge will be applied

Please attach a cheque for £291.00 (made payable to Swindon Borough Council) or a purchase order for invoicing purposes. Internal SBC or SCS applicants must supply an expenditure code.

I have read and agree to the conditions at (a) to (l) above and am authorised to sign this

Application on behalf of .............................................................(name of company/organisation)

Signed: .............................................................................Date........................................

V.2016-17
## Application for Temporary traffic restriction

1) **Location / Road / Footpath**  
Road name and route no (if any) and precise lengths of highway affected (to be shown on the plan)

<table>
<thead>
<tr>
<th>Type of temporary restriction required (tick as appropriate)</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Road closure</td>
<td>☐</td>
</tr>
<tr>
<td>Waiting restriction</td>
<td>☐</td>
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<tr>
<td>PROW closure</td>
<td>☐</td>
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<tr>
<td>Weight restriction</td>
<td>☐</td>
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<tr>
<td>Speed restriction</td>
<td>☐</td>
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<tr>
<td>Other (please specify)</td>
<td>☐</td>
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</tbody>
</table>

2) **Alternative Route (if applicable)**

3) **Period of closure / restriction (if Waiting Restriction please specify times required):**

   
   From: ___________________________  

   To: ___________________________

4) **Timing of Restriction**

   - 24 Hour
   - overnight
   - daytime

   Please give timings for overnight and daytime restriction: ___________________________

5) **Purpose of restriction:**

   ____________________________________________

6) **Purchase Order reference if appropriate:**

   ____________________________________________

7) **For SBC or SCS applicants please give expenditure code:**

   ____________________________________________

The supervisor of the works is to be qualified as required under Section 67 of the New Roads and Street Works Act 1991.

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Applicants Name: ____________________________________________

Company Name: ____________________________________________

Address: ____________________________________________

Invoice address if different: ____________________________________________

Telephone No: ____________________________________________

Mobile (if applicable): ____________________________________________

E-mail: ____________________________________________

Fax: ____________________________________________

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Name and telephone number of representative to be contacted for emergency call-out/maintenance purposes. (These details to be displayed on an information board to be located on site.)

Name: ____________________________________________

Emergency Tel No: ____________________________________________
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These forms should be signed and submitted, together with a copy of the closure plan, to the following address:

Street Works Team
Swindon Borough Council
4th floor Wat Tyler House West, Beckhampton Street, Swindon, Wilts, SN1 2JG
E-mail streetworks@swindon.gov.uk

Contact for information: Tel (01793) 466386 Fax (01793) 466446

Consultation – Applicants must make arrangements for residents/business affected by closures to be notified. An example letter is provided below. Restriction dates and times will only be confirmed to you when the council has processed the application.

Dear Owner/Occupier

NOTICE OF RESTRICTION
NAME OF ROAD - REASON FOR RESTRICTION

We wish to advise you that the contractor NAME OF CONTRACTOR of ADDRESS will be carrying out TYPE OF WORK in NAME OF ROAD commencing:
DATES & TIMES

It is anticipated that these restrictions will take approximately LENGTH OF TIME to complete.

ANY GUIDELINES TO RESIDENTS / BUSINESSES EG The works / restrictions cannot be successfully or quickly completed /implemented if vehicles cause obstruction or disregard the closures/ restrictions, so please pay careful attention to the signage on the street during the closure period(s).

Should you have any queries please do not hesitate to contact NAME OF CONTRACTOR on TELEPHONE NUMBER.
We regret any inconvenience caused, but trust you will appreciate the benefits of the works once complete.

Yours faithfully

NAME