



**TEMPORARY TRAFFIC REGULATION  
ORDER/NOTICE**

**APPLICATION FORM  
April 2012 – March 2013**

**Part 1:**  
**APPLICATION FOR SOLIHULL MBC**  
**TO IMPOSE A TEMPORARY TRAFFIC**  
**REGULATION ORDER/NOTICE**

<b>Works Reference Number</b> [Incl. Prefix]	
<b>Works Notice Submission Date</b>	YYYY-MM-DD
<b>Closure Application Date</b>	YYYY-MM-DD

**Applicant Company Details**

<b>Contact Name:</b>		<b>Contact Number:</b> (may appear in notice/order)	
<b>Company Name:</b> (will appear in notice)			
<b>Company Address:</b>			
<b>On Behalf of:</b>			
<b>Purchase Order Number:</b>			

In making this application the applicant named above:

1. Agrees to pay the charge associated with the restriction (**£1440.00 (April 2012-March 2013)**).
2. Agrees to fulfil the Standard Conditions as set out in the guidance.
3. Recognises that Solihull MBC may impose Additional Conditions specific to this particular application.

**Traffic Management Company Details**

<b>Contact Name:</b> (will appear in notice)		<b>Contact Number:</b> (may appear in notice/order)	
<b>Company Name:</b>			
<b>Company Address:</b>			

**Reason for Restriction**

<b>Description of Activity:</b>	
<b>Justification for Restriction:</b>	

### Location of Restriction

Street Name/Descriptor	
Locality	
Town	
USRN from NSG	

### Extent of Restriction [A plan must be provided on Part 2 of this form]

Street Centreline Co-ordinates	Start Eastings	Start Northings	End Eastings	End Northings
Description of Extent	[plan attached]			
Emergency Vehicle Access [Check 1 box only]	<input type="checkbox"/> Access will be maintained through the site for Police, Fire and Ambulance Services responding to emergencies. Warning arrangements to be agreed. <input type="checkbox"/> Access <b>cannot</b> be provided through the restriction for Police, Fire and Ambulance Services responding to emergencies			
Pedestrian Access Provision [Check 1 box only]	<input type="checkbox"/> Pedestrian access to all properties within the restriction will be maintained along defined routes throughout the period of closure. <input type="checkbox"/> Pedestrian access to all properties within the restriction and access through the restriction will be maintained along defined routes throughout the period of closure.			

### Period[s] when restriction will apply

Period Number	Start Date	Start Time	End Date	End Time
1		:		:
2		:		:
3		:		:
4		:		:
5		:		:

**Under the Traffic Management Act 2004, this form needs to be fully completed and submitted at least 3 months in advance of the closure date**

**Part 2**

**Works Reference  
Number:**

**LOCATION AND EXTENTS PLAN**

A PLAN SHOWING THE EXTENT OF THE RESTRICTION IS TO BE  
INSERTED HERE

IT MUST BE SUFFICIENTLY DETAILED TO INDICATE ACCESS ROUTES  
TO PROPERTIES OR THROUGH THE RESTRICTION FOR  
PEDESTRIANS

**PROPOSED DIVERSION ROUTE [1:50,000 OR LESS]**

A PLAN SHOWING THE PROPOSED DIVERSION ROUTE IS TO BE SHOWN  
HERE

IT MUST BE SUFFICIENTLY DETAILED TO INDICATE CLEARLY THE  
ENTIRE SUGGESTED ROUTE