

**ROAD/FOOTPATH TEMPORARY CLOSURE REQUEST.**  
(Receipt of this form does not imply that the proposed closure has been granted).



**DATE:** \_\_\_\_\_

**TO: HEAD OF NETWORK MANAGEMENT.**

**REF:** \_\_\_\_\_

West Offices, Station Rise  
York. YO1 6GA

**NAME OF ORIGINATOR:**

**ADDRESS (invoice details):**

\_\_\_\_\_  
\_\_\_\_\_

Telephone No:

Fax No:

**NAME OF CONTRACTOR/SUB CONTRACTOR:**

**ADDRESS:**

\_\_\_\_\_  
\_\_\_\_\_

Telephone No:

Fax No:

**NAME OF SCHEME:**

\_\_\_\_\_  
\_\_\_\_\_

**PURPOSE OF CLOSURE:**

\_\_\_\_\_  
\_\_\_\_\_

**TYPE OF CLOSURE:**

**Footway / Carriageway**

\*(Delete as appropriate)

**LOCATION OF ROAD CLOSURE:**

Road / Street \_\_\_\_\_ Village / Town \_\_\_\_\_

**DURATION OF CLOSURE:**

**FROM:**

**TO:**

\_\_\_\_\_  
\_\_\_\_\_

**TIMES IF APPLICABLE:**

**FROM:**

**TO:**

(Please give as much information as possible)

Mon-Fri

Sat

Sun

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SITE MEETINGS:**

\* Delete as appropriate

Have you or your contractors already had a site meeting with NRSWA Engineer? **YES/NO\***

If "YES" when did the meeting take place and with whom? \_\_\_\_\_

\_\_\_\_\_

Have you or your contractors had talks/site meeting with any other **YES/NO\***  
Council officer?

If "YES" when did the talk/meeting take place and with whom? \_\_\_\_\_

\_\_\_\_\_

**ADDITIONAL INFORMATION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Requests will be assessed on the information you provide and, if authorised, a closure will be put in place by way of a 'Notice' or 'Order' depending on the period and purpose of the closure. It will not be possible to respond to requests immediately unless the request can be legitimately classed as in connection with an emergency.**

**Where a closure is required for a non-urgent purpose then you must ensure that your application is made at least 21 days before the proposed commencement date to ensure that your requirements can be met.**

**ADDITIONAL INFORMATION:**

\* Delete as appropriate.

Is access available for:

- 1. Residents vehicles? **YES/NO\***
- 2. Emergency vehicles? **YES/NO\***

Will the road/footpath be reopened at the end of each day? **YES/NO\***

Are any existing one way orders to be rescinded? **YES/NO/NA\***

Are any existing left/right signs to be rescinded? **YES/NO/NA\***

Name the streets/footways to be affected: \_\_\_\_\_

\_\_\_\_\_

Will pedestrian access be maintained at all times? **YES/NO\***

If "NO" please state reason: \_\_\_\_\_

\_\_\_\_\_

Is the road on a bus route? **YES/NO\***

If "YES" please contact **Sam Fryers, Public Transport Planner, 01904 551434, [sam.fryers@york.gov.uk](mailto:sam.fryers@york.gov.uk)**

**PLEASE NOTE:**

A MINIMUM PERIOD OF **THREE WEEKS IS REQUIRED FOR PROCESSING**. IF THIS FORM IS NOT COMPLETED THEN IT WILL BE RETURNED FOR COMPLETION. THIS WILL EXTEND THE PROCESSING PERIOD.

PRIOR TO COMPLETING THIS FORM, NETWORK MANAGEMENT MUST BE CONSULTED REGARDING DIVERSION SIGNAGE AND FOR THIS PURPOSE THE FOLLOWING INFORMATION IS REQUIRED BEFORE ANY CLOSURE REQUEST CAN BE PROCESSED.

- 1. A PLAN SHOWING THE LOCATION OF THE PROPOSED ROAD CLOSURE;**
- 2. A PLAN SHOWING THE PROPOSED DIVERSION ROUTE;**
- 3. A PLAN SHOWING THE SIGNAGE FOR THE PROPOSED DIVERSION ROUTE.**

**YOU WILL BE REQUIRED TO MAILSHOT AFFECTED PROPERTIES.**

**PLEASE NOTE:** THE AMINISTRATIVE CHARGE FOR A TEMPORARY ROAD/FOOTPATH CLOSURE IS BETWEEN £483 AND £1,452 (DEPENDANT ON SCALE OF WORKS) PLUS ANY ADVERTISING COSTS INCURRED WHERE THE CLOSURE NEEDS TO BE IMPOSED BY AN ORDER AS OPPOSED TO A NOTICE (OUTSIDE THE SCOPE OF V.A.T.). THE APPROPRIATE AMOUNT WILL BE INVOICED IF THE CLOSURE IS GRANTED.

**CANCELLATION POLICY:** IF CANCELLATION OCCURS AFTER 10 DAYS PRIOR TO THE COMMENCEMENT DATE, THE FULL AMOUNT WILL BE CHARGED.

**I agree that I or my nominated contractor will be responsible for:**

- a) **The provision and installation of road signs 2 weeks prior to the commencement date of the road closure, advertising the commencement date, duration of the road closure, the contractor for the works, and a 24-hour contact telephone phone number.**
- b) **The provision, installation and maintenance of any temporary signage for businesses etc, and agreed with the Highway Authority prior to installation.**
- c) **Submitting a plan 6 weeks prior to the commencement date of the road closure, indicating the nature and position of all road signs, traffic cones and barriers associated with the road closure and the approved alternative route, for the approval of the Highway Authority.**
- d) **The provision, installation and maintenance of road signs, traffic cones and barriers as specified in the approved plan, including road signs at each end of the road closure stating the contractor for the works, and a 24 hour contact telephone phone number.**
- e) **Consultation with the Parish Council, Statutory Undertakers, affected businesses and residents during the road closure period, where necessary.**
- f) **Re-opening the road with immediate effect should work be completed ahead of schedule, notifying the Highway Authority as soon as the road has re-opened, and removing all temporary road signs, traffic cones and barriers.**

**SIGNED:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**AUTHORISED:** \_\_\_\_\_ **Richard Bogg**  
**Traffic & Highway Development Manager.**

INTERNAL: CHARGE CODE/ACCOUNT No. \_\_\_\_\_