

**APPLICATION FOR  
A TEMPORARY  
RESTRICTION****Environmental Services**

Civic Centre, Stockwell Close, Bromley BR1 3UH

Telephone: 020 8464 3333 - DX5727

Fax: 020 8313 4796

Direct Line: 020 8313 4907

Email: Dave.blackburn@bromley.gov.uk



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Traffic Authority Ref:	
Works Reference Number: (inc. Prefix)	
Works Notice Submission Date:	DD-MM-YYYY
Restriction Application Date:	DD-MM-YYYY

**Applicant Details**

Applicant Name:		Contact Number:	
		Fax Number:	
E-Mail Address of Applicant			
Company Name <small>(will appear in notice)</small>			
Company Address			
On Behalf of: <small>(will appear in notice)</small>	If works are for a statutory organisation, name them here		
Invoice Address		Purchase Order Number:	

In making this application the applicant named above:

1. Agrees to pay the charge associated with the restriction. The terms relating to a Closure are designed to cover the cost of providing a TTRO or TTRN currently the fee for making an order is £1,680.00 (TTRO).
2. Agrees to fulfil the Standard Conditions as set out in the Guide to Applicants (Form TTRO-2).
3. Recognises that the Authority may impose Additional Conditions specific to a particular application.

**Reason for Restriction**

Type of Restriction	Specify, Closure, Weight, Height, Speed, Parking etc.
Reason for Restriction	Emergency / Planned* <small>* delete as necessary</small>
Description of Activity	
Justification for Restriction	Must identify why the restriction as necessary

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**Location of Restriction**

<b>Street Name</b>	
<b>Locality</b>	
<b>Town</b>	
<b>USRN from NSG</b>	
<b>Plan Required</b>	Include a Plan showing the Location of Restrictions, detailed to show the suggested diversion route, sufficiently detailed to indicate clearly the entire suggested route.

**Extent of Restriction**

<b>Street Centreline Coordinates</b>	Start Eastings	Start Northings	End Eastings	End Northings
<b>Description of Extent Plan Required</b>	Include a Plan showing the location and extent of Restrictions, detailed to indicate access routes to properties or through the restriction for pedestrians			
<b>Emergency Vehicle Access Provisions</b>				
<b>Pedestrian Access Provisions (tick one box only)</b>	<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) of restriction to be imposed**

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

Note: Restrictions will only apply during such times and to such extent as shall from time to time be indicated by traffic signs prescribed by The Traffic Signs Regulations and General Directions 2002. It will be the applicant's responsibility to ensure that restrictions and the diversion routes are properly signed in accordance with the regulations and as indicated in the Traffic Management plan.

Signed .....

Print Name: \_\_\_\_\_