

APPLICATION FOR TEMPORARY TRAFFIC MANAGEMENT ORDER –SECTION 14 of the ROAD TRAFFIC REGULATION ACT 1984.

Send all correspondence to: London Borough of Wandsworth, Network Management Section, Ground Floor Frogmore House Dormay Street, London SW18 1EY. Email: streetworks@richmondandwandsworth.gov.uk

S76 of The New Roads and Street Works Act 1991 authorises that the whole of the costs incurred by a highway authority in making an order under the terms of s 14 of the Road Traffic Regulation Act 1984 are recoverable. The current cost of such an order in Wandsworth is £ 1,942.00. Checking the box below confirms acceptance of this amount and confirms the inclusion with this form of a cheque made payable to 'Wandsworth Borough Council'.

APPLICANT NAME:	
APPLICANT E-MAIL:	
CONTACT TELEPHONE:	
DATE OF APPLICATION:	
COMPANY NAME:	
COMPANY ADDRESS:	
PAYMENT METHOD (Please	Cheque 🗌
note that no card payment is to be	Credit/ Debit card
made until a reference is provided)	
	Name (Company or norman)
CONTACT DETAILS	Name (Company or person):
AVAILABLE TO THE PUBLIC (on	
website)	Tel:

Location Details:

ROAD NAME and address of	
works location	
POSTCODE	

Nature and extent of restrictions: (please tick all as appropriate):

Road Closure (Carriageway)Directional closureChanges to One-Way StreetFootway / Footpath ClosureParking Restrictions (Not CPZ)Banned turns (introduction or suspension)Suspension of Bus LaneCycle lane restriction/ closure

Other:

Reason for the restriction and details of works to be undertaken:		
	START	END

START AND END DATE &	DATE	TIME	DATE	TIME
TIME (<u>At least 6 weeks</u>				
advanced notice is required)				
Include all necessary dates and times				
DAYS THAT RESTRICTIONS				
WILL APPLY (e.g. Monday –				
Friday/ Saturday – Monday)				
TIMES THAT RESTRICTIONS				
WILL APPLY (e.g. 09:00-				
16:00/ at any time)				
START POINT OF				
CLOSURE/RESTRICTION				
(Junction or property number)				
END POINT OF				
CLOSURE/RESTRICTION				
(Junction or / property number)				
DIRECTION OF CLOSURE (if				
applicable, e.g. Northbound)				
Westbound closure)				
PERMIT NUMBER / PAA				
NUMBER (if applicable)				

3) Please clearly state and outline the diversion route whilst the closures/	restrictions are in
place: Please do not refer to any plans although a traffic management plan MUST b	be included with the
application.	

4) Who can we contact about the works? WITHIN WORKING HOURS NAME: OUTSIDE WORKING HOURS NAME: CONTACT TELEPHONE: CONTACT TELEPHONE:

SIGNED:

DATE: / /

Notes: Please provide details of the exact location of the works. The reason why the works have to be carried out (e.g. gas connections, crane operations etc). Details of all restrictions requested must be included in any traffic management plans complete with traffic signage in accordance with Chapter 8 of the Traffic Signs Manual 2006, and the Traffic Signs Regulations and General Directions 2016. The traffic order request must be received by the highway authority at least 6 weeks in advance of the start date of restrictions. If the proposed works affects or are near a bus lane or a bus stop, then it is the applicant's responsibility to inform London Buses:

Please include with the application the following:

- Traffic management plan
- Method statement

- Draft letter to residents
- Risk assessment