



APPLICATION FOR TEMPORARY ROAD CLOSURE

Road Works

Pursuant to the 10th Schedule of the Local Government Act 1974

To: Roding Unit
Waitaki District Council
Private Bag 50058
OAMARU 9444

I/We _____

(Full name and address of applicant/s)

of _____

request the Waitaki District Council to consider the temporary closure of part/parts/the whole (delete as required) of a local legal road/street in the Waitaki District, as described below:

Activity: _____

Contractor: _____

Roads to be closed: _____

Date and Time of Closure: _____

This form must be submitted **within 21 days but no later than 7 days** of date of activity requiring road closure in order to allow for the following tasks:

I/We agree to do the following:

1. Submit draft letter-drop correspondence and a draft newspaper advertisement of the closure to the Roding Unit for approval.
2. Distribute the approved letter-drop correspondence to affected parties and supply a list showing which affected parties have been advised of the closure.
3. Submit a Traffic Management Plan (TMP) for approval. If a generic TMP is to be used please notify the Roding Unit and submit a diagram of the proposed location.
4. Organise the approved advertising of the activity and pay all advertising costs related to the closure (Public Notification of Road Closures).

Please note that it is standard practice for two advertisements to be placed in local newspapers (i.e. Waitaki Herald and Otago Daily Times). The first provides notice of the activity typically a week out from the start date. The second advertisement is placed on either Friday or Saturday immediately preceding the activity to remind people of the closure.

Radio advertisement for significant projects is recommended.

5. Provide evidence of public liability insurance to Council (if applicable).

Signature: _____

(To be signed by the applicant or the person authorised to sign on behalf of the applicant)

Date: _____

Contact details of Applicant:

Name: _____

Address: _____

Telephone: _____ Mobile: _____

Email: _____ Fax: _____

Note:

- *This application does not constitute any form of commitment from the Council to proceed with or approve the Temporary Road Closure Application.*
- *Some conditions of this closure may be waived at the discretion of the roading department due to the nature of the closure. This does not imply that waivers such as this will be forthcoming on any other occasion for any other activity.*

Traffic Management Plan Contractors:

A list of contractors are available on the Council website www.waitaki.govt.nz

FOR OFFICE USE ONLY

Application Received: Date Received:/...../.....