

## **Temporary Traffic Orders - Application for Temporary Traffic Order**

## Key

All black text is repeated on the application form

All green text explains what detail is required

Name of Applicant Address	Name and Address of Applicant	Invoice Address if different	
Contact tel. No Email Date of Application	Contact tel. No Email Date of Application	Contact tel. No Email Date of Application	
Type of Temporary Traffic Order			
Purpose of Restriction / Type of work	State reason why a Temporary Traffic Order is required		
Parish	Name Parish in which TTO is requ	Name Parish in which TTO is required	
Location of restriction (from)	Identify the exact start point of the order, e.g. from outside property No 20		
(to)	Identify the exact end point of the order, e.g. to outside property No 25		
for a distance of (m)	Length of closure		
Dates of closure (from and to) Hours of closure (24 hr, weekdays only etc).	It is important to quote the exact start and end time, day and date of the road closure - mm/hh on dd/mm/yy		
Duration of works	Period of the works		
Alternative Route. Including road names, locally known as names, and numbers at junctions and show on the attached plan with diversion route Signing diagram. Is the Diversion route of similar or greater width/visibility etc.	If a busy road (i.e. if local buses are affected) is being closed, you may need to provide a signed alternative route for affected traffic to get to the other side of the closure. This route must be able to safely cope with the additional traffic it will carry. The need to sign an alternative route depends on the type of route being closed and the duration of the closure – please ask for advice from your local Street Works Office via our Customer Service Centre		



	Width available	Width used
Left Verge	Width in M	Width in M
Left Footway	Width in M	Width in M
Carriageway	Width in M	Width in M
Right Footway	Width in M	Width in M
Right Verge	Width in M	Width in M

Full scheme details	Please provide details of the scheme
Works Requiring the Restriction	
Reasons why alternative Plant, construction methods, etc. would not avoid the need for the closure.	Please state reasons
Please list any non- residential property affected; contact names and numbers.	Please provide details of who you have consulted with
When was contact made?	Date of contact dd/mm/yy
Is a bus route affected? (public and/or school)	Yes /No Travel & Transport Services Authorisation code: Travel & Transport Services approval required prior to application. Please contact TTS via email on <a href="mailto:ptgroadworks@norfolk.gov.uk">ptgroadworks@norfolk.gov.uk</a> and they will supply an authorisation code. Please quote this code on the application form.
Travel & Transport Service contact and outcome of liaison	Please provide contact name and outcome of liaison
TTS liaison Signature or Email confirmation	
What measures will be required to minimise disruption to buses	To assess the impact your proposal may have on buses you should contact our Travel and Transport Services (TTS) team via the Customer Service Centre prior to any application
Is it Traffic Sensitive?	This information can be obtained from the Area Co-ordinator for the area of the scheme
Can the sensitive periods be avoided? If not, why not?	Please state if necessary, why sensitive periods cannot be avoided



Please list any other details or contacts that will assist your application	Please list any other details or contacts	
Scheme Title		
Scheme Reference		
Cost Code		

## Please return this form to:

Streetworks
Community and Environmental Services
County Hall
Martineau Lane
Norwich
Norfolk
NR1 2DH