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# SPECIAL EVENTS APPLICATION FORM

# For the introduction of Temporary Traffic Regulation Orders

This application form is to apply for a Temporary Traffic Regulation Order (TTRO) for all restriction relating to Special Events that include the following: Road/Footway Closures, Width/Environmental Weight Restrictions, One Way, Banned Turn, Restricted Access, Speed Limit, Parking or Loading Restrictions, Suspension of Bus Lane/Gates, Clear Ways, PROW closures, Rolling Roadblocks and Motor Rally’s.

**TIME FRAMES**

**1 – 5 Roads to be included – 10 weeks minimum**

**6 – 14 Roads to be included – 12 weeks minimum**

**15+ Roads to be included – 14 weeks minimum**

**The time frames above are from when Essex Highways have received a complete and accurate application form and all associated documents and ECC have confirmed all is acceptable. (Please see guidelines on webpage)**

**If application is a section 16 A-C and the road/s in question have already been used under a previous section 16 A-C then DfT consent is required which is approximately 4 weeks and is not included in the above time frames. (Please see guidelines on webpage)**

**Applications can be made in advance of the above time frames.**

**YOU WILL BE INVOICED FOR APPLICATION.**

| **Applicant details** | |
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| **Applicant name:**  **(if charity must be the name of the charity)** | *Click or tap here to enter text.* |
| **Applicant address:** | *Click or tap here to enter text.* |
| **Telephone:** | *Click or tap here to enter text.* |
| **E-mail:** | *Click or tap here to enter text.* |
| **On behalf of? (i.e Charity/Organisation/Parish)** | *Click or tap here to enter text.* |
| **Registered Charity Name and Registered Charity Number** | *Click or tap here to enter text.* |
| **Please provide details who to invoice.** | *Click or tap here to enter text.* |
| **Provide Purchase Order details** | *Click or tap here to enter text.* |

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| **Order Details** | | | | | | | | |
| **What is the event** | | | *Click or tap here to enter text.* | | | | | |
| **All district/s where event is being held** | | | *Click or tap here to enter text.* | | | | | |
| **List all types of restrictions required** | | | *Click or tap here to enter text.* | | | | | |
| **List all existing restrictions to be suspended** | | | *Click or tap here to enter text.* | | | | | |
| **Proposed Start Date of Restriction** | | | *Click or tap to enter a date.* | | **Proposed End Date of Restriction** | | | *Click or tap to enter a date.* |
| **Start Time of Restriction** | | | *Click or tap here to enter text.* | | **End Time of Restriction** | | | *Click or tap here to enter text.* |
| **Full Road name and Road number of Restriction** | | | *Click or tap here to enter text.* | | | | | |
| **Name of Town or Parish of Restriction** | | | *Click or tap here to enter text.* | | | | | |
| **Further information of Restricted Road** | | | *Where does the restriction start and finish (junction of, outside property number or name)*  *What direction is the restriciton (North, South, East West)*  *Length of restriction (in metres)*  *An example - Fox Street, from a point 20m north of its junction with West Street, north for a distance of 25m* | | | | | |
| *Click or tap here to enter text.* | | | | | |
| **Does the proposed restriction use the National Highways Network. Is so attach letter of consent.** | | | *Choose an item.* | | | | | |
| **Does the proposed restriction effect a Public Right of Way (PRoW) (this includes footpaths, bridleways and byways) (**[**obtained from our interactive map**](https://rjeh.maps.arcgis.com/apps/instant/sidebar/index.html?appid=372e79c6b5b14fe18698b6e9b3adfa3c)**)** | | | *Choose an item.* | | | | | |
| **Name of Town or Parish of Restriction (list all that apply)** | | | *Click or tap here to enter text.* | | | | | |
| **Description of Public Right of way restriction** | | | Where does the restriction start and finish (junction of)  What direction is the restriciton (North, South, East West)  Length of restriction (in metres)  An example – footpath 2 in named Parish 20 metres from its junction with footpath 3 or a road in named parish, westwards for a distance of 100 metres. | | | | | |
| *Click or tap here to enter text.* | | | | | |
| **Does proposed restriction cross County boundaries? if so which County and attached their consent** | | | *Choose an item.*  *Click or tap here to enter text.* | | | | | |
| **Diversions** | | | | | | | | |
| **List all the Roads/Footpath (Bridleway, Byway numbers) to be used as the diversion route:** | | | | | | | | |
| *Click or tap here to enter text.* | | | | | | | | |
| **Please list any Towns or Parishes and Districts affected by diversion** | | | | | | | | |
| **Town/Parish** | | *Click or tap here to enter text.* | | **District** | | | *Click or tap here to enter text.* | |
| **Does proposed diversion route cross County boundaries? If so which County and attach their consent** | | *Choose an item.*  *Click or tap here to enter text.* | | | | | | |
| **Will the restriction or diversion affect sensitive locations? If yes contact the relevant establishments** | | | | | | | | |
| **Schools**  **Hospitals**  **Bus Routes**  **Emergency Services** | *Choose an item.*  *Choose an item.*  *Choose an item.*  *Choose an item.* | | | | | *Click or tap here to enter text.*  *Click or tap here to enter text.*  *Click or tap here to enter text.*  *Click or tap here to enter text.* | | |
| **Attach correspondence from the above establishments** | | | | | | | | |
| **Is access to properties to be maintained?**  **Vehicles**  **Pedestrians** | *Choose an item.*  *Choose an item.*  *Choose an item.* | | | | | *Click or tap here to enter text.* | | |
| **Is access to be maintained for emergency service vehicles?** | *Choose an item.* | | | | |  | | |
| **If no, please ensure you have liaised with the emergency services prior to sending the application.** | | | | | | | |

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| **Please read the following declaration and sign below to confirm that you have read, understood, and agreed to the following condition** | | | |
| **I understand that Essex County Council will invoice me for processing the above application and I agree to pay the appropriate fee at the time of application.**  **For the latest fees please** [**check online**](https://www.essexhighways.org/special-events)**.**  **Additional amounts of roads/footpaths will be charged at a higher rate to cover the advertising.**  **If the restriction has been advertised, you will be charged even if the event is cancelled.**  **Confirmation that a minimum of £10 million public liability insurance is held.**  **Confirmation that the plan included is appropriate for sharing with members of the public (no sensitive information). It is imperative that all road names should be clear, concise, correct and match those stated on the application form.**  **Confirmation that your diversion route closure does not conflict with any other scheduled works (please check** [**one.network**](https://one.network/uk/essex)**)**  **Confirmation that all signage on site will comply with TSRGD 2016 (Traffic Signs Regulations and General Directions.**  **Confirmation that all signage will be installed to comply with Traffic Signs Chapter 8.**  **Confirmation that all signage on site will be the correct ‘x’ height for the speed limit of road.**  **Confirmation that all signage placed on site will be installed by an accredited (a CSCS card and NRSWA card or equivalent must be held) person.**  **Confirmation that a risk assessment has been carried out and evidenced.**  **Provide written consent from every owner if restriction or diversion is on a private road.**  **A reputable Traffic Management (TM) company must be used at all times, when working on the public highway.**  **For additional guidance please check the** [**Essex Highways website**](https://www.essexhighways.org/special-events) | | | |
| **Name:**  *(Please print)* | *Click or tap here to enter text.* | **Date:** | *Click or tap to enter a date.* |
| **Signature:** |  | **Contact details:** | *Click or tap here to enter text.* |
| **Position in company:** | *Click or tap here to enter text.* | **Name of company:** | *Click or tap here to enter text.* |

**Please submit completed applications to** [**Network.Operations@essexhighways.org**](mailto:Network.Operations@essexhighways.org)

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| **ECC Office Use Only CHECK (Network Operations)** | | | | |
| **Date application received** | *Click or tap to enter a date.* | | | |
| **Insurance** |  | | | |
| **Risk assessment** |  | | | |
| **Plans and application road names match** |  | | | |
| **Other counties approval (attached)** |  | | | |
| **National Highways approval (attached)** |  | | | |
| **Passenger Transport Notified (if applicable)** |  | | | |
| **Confirmation of all sensitive locations** |  | | | |
| **Residents of private roads consent (if applicable)** |  | | | |
| **Plotted on one.network** |  | | | |
| **Charity number (if applicable)** |  | | | |
| **Application checked.** |  | | | |
| **Network operation approval** | **Signed:** | *Click or tap here to enter text.* | **Date:** | *Click or tap to enter a date.* |

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| **Part Six: Please complete if multiple restrictions are needed (if more room needed, attach extra page)** |

| **Restriction No.** | **Road Name/PRoW Number.** | **Parish** | **District** | **Restriction** | **Description – Length/extent of restriction.** |
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| **Part Seven: Please complete if multiple diversions are needed (if more room needed, attach extra page)** |

**Note. Please ensure diversion number relates to restriction number above.**

| **Restriction No.** | **Diversion Route.** |
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