



# APPLICATION FOR TEMPORARY ROAD CLOSURE PERMIT

This application should be submitted to Council with a minimum 20 working days notice of the proposed road closure.

Office Use Only Records Department	File No: <input style="width: 150px; height: 20px;" type="text"/>	Document No: <input style="width: 150px; height: 20px;" type="text"/>
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## PLEASE FILL IN DETAILS OF PROPOSED ROAD CLOSURE:

Date of Application: \_\_\_\_\_

Group/Body Applying: \_\_\_\_\_

Applicant Representative: \_\_\_\_\_

Postal Address: \_\_\_\_\_

P/Code: \_\_\_\_\_

Contact Phone No: \_\_\_\_\_ Mobile Phone No: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

## ROAD CLOSURE DETAILS:

Location (Town): \_\_\_\_\_

Streets/Roads Requesting to be Closed: \_\_\_\_\_

Vicroads Map Ref: \_\_\_\_\_ Please provide a map outlining areas of closure\*\*.

Date of Closure: \_\_\_\_\_ Day: \_\_\_\_\_

Time: Start \_\_\_\_\_ AM PM Finish \_\_\_\_\_ AM PM

Purpose of proposed closure: \_\_\_\_\_  
(Please include a sketch)

Suggested detour route: \_\_\_\_\_  
(Please include a sketch)

Detail consultation activity with affected Business/Residents: \_\_\_\_\_

Persons (currently qualified) assisting you/your group with erection and removal of traffic management control devices? Names: \_\_\_\_\_

Please provide copies of any correspondence, notification, to affected person/s

**PLEASE NOTE: Proof of your public liability Insurance to the value of (\$10 Million Dollars) is required.**

**PRIVACY STATEMENT:**

We respect your privacy. We will not sell or give away your personal information, unless required by law. Occasionally, we may use your details for our own research purposes or to let you know about other council information. If you want to see your personal data, modify your details, or if you receive information from us you do not want in the future, please contact 1300 520 520.

Person submitting application:  Signature:  Date:

**OFFICE USE ONLY:**

Can the applicant provide \$10,000,000 Public Liability Insurance cover for this event, indemnifying the Road Authority (ie. Buloke Shire Council and/or VicRoads) from third party insurance claims? Yes  No

Can the applicant provide a copy of Certificate for the Insurance? (If yes please include a copy of insurance policy as an attachment) Yes  No

Are local police assisting the group with erection and removal of traffic management control devices? Yes  No

Has the applicant supplied a copy of written approval from Victoria Police? Yes  No

Have copies of any correspondence, notification, to affected person/s been attached? Yes  No

Has a copy of map outlining areas of closure been attached? Yes  No