FORM TTRO-1

APPLICATION FOR A TEMPORARY RESTRICTION

Environmental Services

Civic Centre, Stockwell Close, Bromley BR1 3UH

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Traffic Authority Ref:	
Works Reference Number: (inc. Prefix)	
Works Notice Submission Date:	DD-MM-YYYY
Restriction Application Date:	DD-MM-YYYY

Applicant Details

Applicant Name:	Contact Number: Fax Number:
E-Mail Address of Applicant	
Company Name (will appear in notice)	
Company Address	
On Behalf of: (will appear in notice)	If works are for a statutory organisation, name them here
Invoice Address	Purchase Order Number:

In making this application the applicant named above:

- 1. Agrees to pay the charge associated with the restriction. The terms relating to a Closure are designed to cover the cost of providing a TTRO or TTRN currently the fee for making an order is £2,850.00 (TTRO).
- 2. Agrees to fulfil the Standard Conditions as set out in the Guide to Applicants (Form TTRO-2).
- 3. Recognises that the Authority may impose Additional Conditions specific to a particular application.

Reason for Restriction

Type of Restriction		Specify, Closure, Weight, Height, Speed, Parking etc.
Reason for Restriction	Emergency / Planned*	* delete as necessary
Description of Activity		
Justification for Restriction		Must identify why the restriction as necessary

Location of Restr	iction						
Street Name							
Locality							
Town USRN from NSG							
USKN IIOIII NSG							
Plan Required	Include a Plan showing the Location of Restrictions, detailed to show the suggested diversion route, sufficiently detailed to indicate clearly the entire suggested route.						
Extent of Restrict	tion						
Street Centreline Coordinates	Start Eastings	Start Northings		End Eastings	End Northings		
Description of Extent Plan Required		ving the location a s to properties or			, detailed to indicate r pedestrians		
Emergency Vehicle Access Provisions							
Dedoctrion Access	☐ Pedestrian Access to	all properties	Pedes	strian Access to a	Il properties within the		
Pedestrian Access Provisions	within the restriction will I				ugh the restriction will be		
(tick one box only)	along defined routes thro	ughout the period		-	outes throughout the		
(How one box only)	of closure.		period of	closure.			
Doriod(a) of rectr	lation to be imposed	•					
Period Number	iction to be imposed Start Date	Start Time		End Date	End Time		
1	Start Date	Start Time		Ellu Dale	Ena mine		
2							
3							
4							
Note: Restrictions will of indicated by traffic sign will be the applicant's signed in accordance will be the applicant of the	s prescribed by The responsibility to ens	Traffic Signs Fure that restrict	Regulations an	ons and Gene d the diversio	ral Directions 2002. In routes are properly		
	Signed						
	Print Name:						