

Temporary Road Closure Application

You may use this form to apply to close a road temporarily. This form must be submitted at least six weeks prior to the event.

How to complete this form

- Ensure that all the fields have been filled out correctly.
- Inadequate information will delay the processing of your application
- Once completed, you can submit this form by mail, email or in person. (Refer part 6)

PART 1 Applicant Details	Name:	
	Business / Company Name (if applicable):	
	Address:	
	Phone:	Fax:
	Mobile:	
	Email:	
	Contact Name:	
	Position:	
PART 2 Description of Road Closure	Street Name:	
	Between Street:	and Street:
	Town:	
	Date/s of closure:	
	Proposed hours:	
	Please describe the reason for the temporary road closure:	
PART 3 Police Notification <i>(written approval required)</i>	I have notified the following Police Station about the proposed temporary road closure:	
	Police Station:	
	Officer's Name and Title:	
	Comments (if any):	

PART 4 Application Checklist <i>(Please tick appropriate box)</i>	Below is a list of documentation that must be provided at the time of the application.	YES	N/A
	1. Road Traffic Management Plan	<input type="checkbox"/>	<input type="checkbox"/>
	2. Memorandum of Authorisation (attached to application)	<input type="checkbox"/>	<input type="checkbox"/>
	3. Public Liability Insurance	<input type="checkbox"/>	<input type="checkbox"/>
	4. VicRoads Approval	<input type="checkbox"/>	<input type="checkbox"/>
	5. Police Approval	<input type="checkbox"/>	<input type="checkbox"/>
	NOTE: 1. Council requires that the arrangements for traffic management on the site are to comply with the Road Management Act 2004 Worksite Safety – Traffic Management Code of Practice. The applicant is responsible for the provision of signage in accordance with the Code. 2. In accordance with the Road Safety (Traffic Management) Regulations 2009, you are required to complete a MOA (Memorandum of Authorisation). 3. A Public Liability Insurance Certificate of Currency for \$10 million. 4. If the main road is under VicRoads control, approval for the closure of the road is required from Vic Roads. 5. Police approval is required for any event located on a road.		
PART 5 Notification & Advertisement	Upon Council acknowledging receipt of all required documentation, Council will: <ol style="list-style-type: none"> 1. Advise all Emergency Services and other relevant organisations of the intended closures. 2. Advertise in the newspaper accordingly of the general road closures to the public. An invoice will be forwarded to your Committee for the cost of the advertising. 		
PART 6 Lodgment Details	You can lodge the completed application by: <p>Email: engineering@swanhill.vic.gov.au</p> <p>Mail: PO Box 488 Swan Hill Vic 3585</p> <p>In Person: 45 Splatt Street Swan Hill Vic 3585</p> <p>Office Hours: Monday to Friday 8.30am to 5.00pm</p> <p>What now? Once your application is received, a Council officer will contact you if further information is required. Written consent will be sent in due course.</p>		

Applicant declaration

I declare that the information I have provided is true and correct and that I have read and understood the Conditions of Consent attached to this application and agree to comply with them.

Signature of Applicant: _____ Date: _____

OFFICE USE ONLY. TO BE COMPLETED BY THE ENGINEERING PROJECTS & ASSETS DEPARTMENT	
As a Swan Hill Rural City Council officer with the delegated power, I hereby consent to the temporary road closure as detailed above, providing that the following conditions of consent are adhered to.	
Request accepted: Yes No	Signature:
Name of Officer: ENGINEERING, PROJECTS & ASSETS MANAGER	
Acceptance letter sent:	

Conditions of Consent for Temporary Road Closures

1. The closures are to be suitably manned at all times to assist in directing and controlling traffic.
2. The closure is to be conducted in a manner that results in the minimum inconvenience to other road users.
3. Suitable reflective detour and warning signs are to be erected by your Committee, including flashing lights for any night time closures.
4. Personnel manning the detour during the hours of darkness are required to wear appropriate reflective apparel.
5. Council requires that the arrangements for traffic management on the site are to comply with the Road Management Act 2004 Worksite Safety – Traffic Management Code of Practice. The applicant is responsible for the provision of signage in accordance with the Code.
6. Road Closed signs are to be erected and maintained at each end of the closure for the duration of the closure only. The signs are to be erected by a person qualified in road traffic management. For the hire of the Road Closed signs and barricades, please contact John Graham on 0408 120 987. Your Committee will need to collect and return the equipment from the Karinie Street Depot. A fee will apply if the equipment is damaged, lost or not returned following the event.
7. Only suitably qualified personnel are to be used for traffic management activities. If Traffic Management personnel are to be used for traffic control activities, a certified copy of their qualifications must be forwarded to Council.
8. The organisers agree to reimburse Council with any cost that Council may incur if it is required to return any areas used for the staging of the event or closure to their original condition.
9. Any lawful direction(s) by members of the Victoria Police, authorised local Municipal Council(s) and VicRoads Officers, must be complied with at all times.
10. At the conclusion of the event or closure, organisers shall remove all display and promotional material, rubbish and other equipment associated with the staging of the closures and leave the area in a clean and tidy condition.
11. It should be noted that Council does not accept any responsibility for accidents, damage or injury to property, participants or third parties for events or closures.



SWAN HILL RURAL CITY COUNCIL
MEMORANDUM OF AUTHORISATION
TO ERECT, DISPLAY, PLACE, REMOVE OR ALTER TRAFFIC CONTROL DEVICES

APPLICATION				
Pursuant to Regulations under Part 2 – Installation of Traffic Control Devices – of the Road Safety (Traffic Management) Regulations 2009, I/we hereby apply for authorisation to erect, display, place, remove or alter (as the case may be) the Traffic Control Device(s) as specified herein.				
I/We also agree and acknowledge that:				
1. The Traffic Control Devices will be removed before the “Expiry (Removal) Date” unless a further authorisation has been granted;				
2. Accurate records of actual usage will be kept in a recoverable document (eg. diary);				
3. The attached plans are a true and accurate reflection of the base information and proposed treatment(s); and				
4. The treatment(s) as shown on the plan(s) are in accordance with the Worksite Safety Traffic Management - Code of Practice.				
1. APPLICATION DATE:		COUNCIL CONTACT DETAILS:		
APPLICANT DETAILS		8. COUNCIL CONTACT:		
2. NAME:		9. COUNCIL CONTRACT / PROJECT NO:		
3. COMPANY:		CONTRACTOR DETAILS		
4. PH NUMBER:		10. CONTRACTOR:		
5. FAX NUMBER:		11. ON SITE CONTACT:		
6. EMAIL:		12. ON SITE CONTACT MOB:		
7. SIGNATURE:		TRAFFIC MANAGEMENT COMPANY DETAILS		
<p>Please do not alter the format of the MOA Application form.</p> <p>Please note that ALL fields must be completed in order to process your MOA application.</p>		13. TRAFFIC MANAGEMENT COMPANY:		
		14. ON SITE CONTACT:		
		15. ON SITE CONTACT MOB:		
16. Have the following been applied for and approved? (Please tick the appropriate boxes).				
	YES	N/A	EXEMPT	Permit / App Number
PLANNING PERMIT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
WORKS WITHIN ROAD RESERVES NOTIFICATION & CONSENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
NOTIFICATION OF PROPOSED WORKS (SHRCC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
DESCRIPTION OF WORK / EVENT				
17. TYPE OF WORK / EVENT:		<input type="text"/>		
18. SCOPE OF WORK:		<input type="text"/>		
18a. LANE CLOSURE DETAILS:		18c. DIRECTION:		<input type="text"/>
18b. SPEED REDUCTION:		18d. TIME DELAY:		<input type="text"/>
19. IS THIS APPLICATION A REPEAT OF ONE PREVIOUSLY AUTHOURISED?:		IF YES, THE SWAN HILL REF NUMBER IS/WAS:		
20. MAJOR CONTROL DEVICE(S):		<input type="text"/>		
21. MINOR CONTROL DEVICE(S):		<input type="text"/>		
22. MAJOR CONTROL DEVICE(S) FOR AFTERCARE:		<input type="text"/>		
23. MINOR CONTROL DEVICE(S) FOR AFTERCARE:		<input type="text"/>		
LOCATION DETAILS				
24. AREA / TOWN / SUBURB:		27. MUNICIPALITY:		
25. DECLARED ROAD NAME:		28. VCSD REF. Edition:		
26. LOCAL ROAD NAME:		29. MELWAY Ref. Edition:		
30. NEAREST INTERSECTING ROAD OR CHAINAGE:		<input type="text"/>		
31. OTHER LOCATION DETAILS:		<input type="text"/>		
EXPECTED DISPLAY DATES / TIMES				
32. DAYS: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday				
33. ERECTION DATE: (i.e. dd/mm/yyyy)		<input type="text"/>		
34. EXPIRY (REMOVAL) DATE: (i.e. dd/mm/yyyy)		<input type="text"/>		
35. DAILY DISPLAY TIMES: (i.e. 9:30am to 3:30pm)		<input type="text"/>		
36. DISPLAY TIMES (AFTER CARE): (i.e. 3:30pm to 9:30am)		<input type="text"/>		
37. PERMANENT DEVICES TO BE CHANGED OR COVERED:		<input type="text"/>		
AUTHORISATION (Swan Hill Rural City Council Internal Use Only)				
As a Swan Hill Rural City Council officer with the delegated power, I hereby grant authority to the use of Traffic Control Devices as specified above.				Authorised copies to:
..... Signature				1. Contractor / Applicant
..... Title				2. Police Highway Patrol
Date:/...../.....				3. Council file
				4. Project file