

**APPLICATION TO REQUEST A TEMPORARY TRAFFIC ORDER i.e.
(Road Closures, Speed Restrictions, One-way Restrictions)**

Please complete this form and return it to: info@IslandRoads.com

APPLICANT	
Name:	
Address:	
Post Code:	
Telephone:	
Mobile:	
Email:	

SITE CONTACT DETAILS	
Name:	Mobile No:

LOCATION DETAILS

ROAD NAMES & Nos:
NAME OF EVENT:
REASONS AS TO WHY TTRO CANNOT BE AVOIDED:
ESTIMATED NUMBER OF PERSONS ATTENDING EVENT:

DATES AND TIMES

1:	DAY & DATE:	TIME:
2:	DAY & DATE:	TIME:

NOTE: A MINIMUM OF 3 MONTHS NOTICE IS REQUIRED BY ISLAND ROADS BEFORE A TTRO CAN START, FROM THE DATE THE APPLICATION IS APPROVED.

TTRO CHARGE:	TBC
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DECLARATION

I HEREBY APPLY FOR PERMISSION TO REQUEST A TEMPORARY TRAFFIC ORDER ON THE HIGHWAY AND AGREE TO COMPLY WITH THE NECESSARY CONDITIONS REQUIRED BY ISLAND ROADS.

SIGNATURE.....DATE.....