# Road Closure ApplicationUnder Town Police Clauses Act 1847

## **Please read guidance notes before completing this form**

## Applicant Details

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| Name: |
| Address: |
| Email address: |
| Telephone number: |

## The Event

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| Name of event: |
| Purpose and nature of event: |
| Date(s) of closure required: |
| Time of closure required: |
| Roads to be closed: |
| Have you included a Map detailing: *(Please tick)*[ ] Positions of road closure and route diversion signs[ ] The route(s) to be closed. [ ] Positions of stewards and first aid arrangements for the event?  |
| Have you enclosed your risk assessment consisting of:*(Please tick)*[ ]  A management plan for setting out the closure.[ ]  Contingency plan, which should identify measures that are in place to ensure safety of the public and participants and access for emergency services in the event of any unforeseen circumstances.[ ] A road signage schedule.[ ] A minimum £10 million Public Liability Insurance  |
| Has this event been held previously? **YES/NO** If yes, please give details |
| **Please Note:** Where there are residents, businesses and public transport operators which may be affected by the closure, the Council would expect the Applicant to engage with those parties prior to making an application and provide evidence that this has been undertaken. The Applicant should demonstrate their consideration and engagement of any responses. |
| Have you consulted any other organisations regarding this event? **YES/NO**If yes, please give details: |
| Please give details of any other businesses, including bus services and residents which may be affected: |

## Declaration

I/we agree to keep clear access at all times for emergency vehicles during the closure and acknowledge that the closure will apply to all other traffic.

I/we agree to provide, erect, maintain and remove all safety measures, including all signs (in accordance with the advice contained in Chapter 8 of the Traffic Signs Manual and the requirements of the Traffic Signs Regulations and General Directions 1994), lighting etc., required to protect the public and property at the site of the event and on the diversionary route for the duration of the closure and to defray all costs incurred in the event of failures to do so.

I/we agree to keep the number of signs to a minimum and reduce inconvenience to diverted traffic. Sections of road to be closed should, wherever possible, take the following form:

(a) a whole road, eg as in the case of a cul-de-sac, terminating at convenient junction(s).

 (b) part of a road length between convenient junctions.

(c) as (a) or (b) but part width only, where one or more traffic lanes (min 10ft wide) can be safely maintained.

I/we agree to ensure that there are sufficient marshals to adequately cover the Road Closure Order and all marshals for the event are adequately trained for their duties to the reasonable satisfaction of the Council and the Police.

I/we agree to pay all costs of making good any damage to the highway for reason of making the Road Closure Order including damage to any alternative route for diverted traffic. Any damage caused to street furniture (signs, street lights, etc) or the surface of the highway to be notified in writing by the applicant to the County Surveyor, Oxfordshire County Council, Speedwell House, Speedwell Street, Oxford, OX1 1NE within 7 days of the event.

I/we hereby indemnify West Oxfordshire District Council against all claims which may be made against them by reason of making the Road Closure Order and to defray all costs incurred as a result of such claims being made.

I/we understand that I am/we are advised to take out public liability insurance for the event.

I/we understand thatfor events on the public highway, Oxfordshire County Council require a copy of £10 million public liability insurance, an up to date risk assessment and a traffic signs plan.

I/we agree to consult all residents, businesses, bus and taxi companies which may be affected by the closure including the local Parish/Town Council and confirm in writing to the Council that we have done so.

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| **Signature:** |
| **Date:** |

I/we agree to be available during, immediately before and after the event so that we can be contacted by the Council or the Police.

I/we understand the if I/we fail to comply with the above requirements I/we may be liable to Court action and that any such failure will be taken into account by the Council in considering future applications for Road Closure Orders by me/us.

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| Please return this form by post or email to:Licensing Team, West Oxfordshire District Council, Council Offices, Woodgreen, Witney, Oxon, OX28 1NBers.licensingandapplications@publicagroup.uk  |

This Council is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form within this Council for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.