**TEMPORARY PROHIBITION BY ORDER**

|  |  |  |  |  |  |  |  |  |  |  |  |
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| **SECTION 1 – CONTACT DETAILS** | | | | | | | | | | | |
| **COMPANY NAME & ADDRESS:** Type here | | | | | | | **CONTACT NAME:** Type here | | | | |
| **DAYTIME TEL NO.:** Type here | | | | |
| **OUT OF HOURS CONTACT NAME:** Type here | | | | |
| **CLIENT:** Type here | | | | | | | **OUT OF HOURS TEL NO.:** Type here | | | | |
| **EMERGENCY / URGENT WORKS:** | | | | |  | | **E-MAIL:** Type here | | | | |
| **SECTION 2 - LOCATION** | | | | | | | | | | | |
| *• A minimum of* ***TWO WEEKS*** *notice is required for an order of three days or less.*  *• A minimum of* ***EIGHT WEEKS*** *notice is required for all other orders.*  *• A minimum of* ***FOUR WEEKS*** *notice is required for any Town and Police Clause (Market/Event/Parade).*  *• It is the applicant’s responsibility to inform residents, businesses, local community, county councillors and amenities of the area that they will be affected by the order (please refer to the guidance notes).*  *• It is the applicant’s responsibility to arrange signs and provide a sign schedule, through a recognised signing company.*  *• The application* ***will not*** *be processed without this sign schedule or a location plan of works.* | | | | | | | | | | | |
| **WORKS REFERENCE NO.:** | | | Type here | | | | | | | | |
| **ROAD NAME:** | | | Type here | | | | | | | | |
| **USRN:** | | | Type here | | | | | | | | |
| **TOWN / VILLAGE:** | | | Type here. | | | | | | | | |
| **GRID REFERENCES:** | | | Type here. | | | | | | | | |
| **SIGNING CONTRACTOR:** | | Type here. | | | | | | | **CONTACT TEL NO.:** | | Type here. |
| **SECTION 3 – ORDER DETAILS** | | | | | | | | | | | |
| **WORKS DESCRIPTION:** | | | Type here | | | | | | | | |
| **START DATE:** | | | Select date | | | | **END DATE:** | | | | Select date |
| **24 HOUR OPERATION?** | | | Select option | If no, enter start and end times**:** | | | | | | 00:00 – 00:00 | |
| **TYPE OF ORDER:** | | | Select option Other: Type here | | | | | | | | |
| **DIVERSION RESTRICTIONS:** | | | Low bridge  One-way system  Weight limit  Tunnel  Other  Other: Type here | | | | | | | | |
| **ACCESS MAINTAINED FOR:** | | | Cyclists  Pedestrians  Buses | | | | | | | | |
| **IS THERE A BUS STOP WITHIN 500 m OF THE RESTRICTION?** | | | | | | | | Select option | | | |
| *If access cannot be maintained for buses, or there are bus stops within 500 m of the proposed restriction, contact must be made with DCC’s Transport Section as soon as possible on 01824 706996 or* [*publictransport@denbighshire.gov.uk*](mailto:publictransport@denbighshire.gov.uk) | | | | | | | | | | | |
| **SECTION 4 - CHARGES** | | | | | | | | | | | |
| *The cost of a short term order is £751.30, emergency/urgent closures are £924.00, all other orders are £2,137.30, all are inclusive of bilingual advertising. These charges are not subject to VAT. All unauthorised closures will be charged at an additional cost of £1,155 per day.* | | | | | | | | | | | |
| **ORDER NUMBER:** | Type here | | | | | **INVOICE ADDRESS:** | | | | Type here | |
| **SIGNED:** | Type here | | | | | **NAME (PRINT):** | | | | Type here | |
| **I confirm I have read and understood the enclosed guidance notes:** | | | | | | | | | |  | |