**APPLICATION TO PLACE BUILDERS SKIP ON THE HIGHWAY
New Roads and Street Works Act 1991, Section 139**

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| **CONTACT DETAILS** |
| **COMPANY NAME & ADDRESS:**Type here | **CONTACT NAME:**Type here |
| **DAYTIME TEL NO.:**Type here |
| **OUT OF HOURS CONTACT NAME:**Type here |
| **E-MAIL:**Type here | **OUT OF HOURS TEL NO.:**Type here |
| **LOCATION DETAILS OF SKIP** |
| **PROPERTY NAME / NUMBER:**Type here |
| **ROAD NAME:**Type here |
| **TOWN:**Type here | **POST CODE:**Type here |
| **SKIP DETAILS** |
| **START DATE:** Select date | **END DATE:** Select date |
| **Will the skip be on the carriageway, footway or verge?** | Choose an item. |
| **Is this a roll on / roll off skip?** | Choose an item. |
| **SITE DETAILS** |
| **Is the skip on a one-way street?** | Choose an item. |
| **Does the street / road have street lighting?** | Choose an item. |
| **Are there any waiting or parking restrictions on the street?** | Choose an item. |
| **Will a rubbish chute be attached to the structure?** | Choose an item. |
| **Are there any traffic signals or pedestrian crossings close to the skip?** | Choose an item. |
| **DECLARATION** |
| **I / we confirm that the Skip Guidance Notes have been read and understood** |
| **SIGNATURE:**Type here | **PRINT NAME:**Type here | **DATE:**Select date  |