

# APPLICATION FORM NO EXCAVATION

**New Roads and Street Works Act 1991, Section 50**  
**To place temporary traffic counters, CCTV cameras or to carry out an inspection or CCTV survey of a sewer with traffic management in the Public Highway**

Please read guidance notes before completing this form

SWL \_\_\_\_\_

(For office use only)

## Section 1 - Applicant

Mr Mrs Ms      First name: ..... Surname: .....

Company / Organisation (If applicable): .....

Address: .....

.....

Post Code: ..... Tel No: .....

Location of proposed works (if different from above):

.....

.....

## I/we apply for permission to

Inspect a service with traffic management (Lift a manhole or undertake a CCTV survey)

Place a temporary traffic counter or CCTV camera

## Section 2 – Work details

Description of works: .....

.....

.....

Proposed Start Date:  Proposed End Date:

*(In the case of temporary Apparatus, please state date of placement and removal of apparatus)*

Works lie within:

Carriageway  Footway  Verge  Cycleway  Bridleway

Proposed working hours: Working Day  24 Hours  Night time

Will the site affect any of the following?

Fixed Traffic Lights  Pedestrian Crossing  Junction  Bus Lane

Level Crossing  Parking / Meter Bay

Temporary apparatus: (Traffic Counters)

Are any tubes crossing the footway?  Are road pins being used?

If the apparatus is being attached to something, (e.g. Street Furniture)

Please specify: .....

# APPLICATION FORM NO EXCAVATION

**New Roads and Street Works Act 1991, Section 50**  
**To place temporary traffic counters, CCTV cameras or to carry out an inspection or CCTV survey**  
**of a sewer with traffic management in the Public Highway**

<b>Section 3 - Traffic management arrangements</b>			
Please indicate the method of traffic management that will be used:			
Give and Take <input type="checkbox"/>	Stop/Go boards <input type="checkbox"/>	Portable Traffic Signals* <input type="checkbox"/>	Road Closure* <input type="checkbox"/>
Priority Working <input type="checkbox"/>	Signing, lighting and guarding only <input type="checkbox"/>	Footway Closure* <input type="checkbox"/>	
<i>*Note: a separate application is required and a method statement may be requested.</i>			

<b>Section 4 - Contractor details</b>
Company Name: .....
Address: .....
24hr Emergency Contact : ..... Fax Number: .....
Email: .....
Public Liability Insurance Cert No: .....
<b>Accredited personnel</b>
Name of trained Operative: .....

<b>Section 5</b>
<b>Approval by Devon County Council</b>
Signed: ..... Date: .....
Name: .....
Additional Conditions: .....
.....
.....

<b>Section 6</b>	
<b>Checklist</b>	
Have Sections 1, 2, 3 and 4 been completed?	✓
Has the cheque been included made payable to Devon County Council?	
Have you included a detailed plan of 1:2500 scale, marking the site or sites in red?	
Have you provided accreditation details of the contractor?	
Have you enclosed the public liability for the contractor?	
Have you supplied any relevant traffic management applications? <i>Please be aware that further information may be requested.</i>	