

**Temporary Traffic Order Application**

**Road / Footway Closure**

New Roads & Street Works Act 1991 / Traffic Management Act 2004

**2025 / 2026 – Charge within this period apply below**

|  |  |
| --- | --- |
| Contractor Name & full address: | FilmFixerHavering Film OfficeUnit C57-59 Great Suffolk StLondon SE1 0BBinfo@haveringfilmoffice.co.ukOffice: 0207 620 039124 hrs: 07919 002 115 |
| Production Name & Reference:*(Contractor who is carrying out works)* |  |
| Production full address: |  |
| Telephone numbers: | Day: Evening/out of hours:  |

I hereby request the London Borough of Havering to give permission for a road closure notice, details of which are given below, and understand that this application must be received by the council at least **eight weeks** before the proposed date of the road closure.

|  |  |
| --- | --- |
| Location: Exact address of road with to and from points, i.e. junctions and/or house numbers etc.  |  |

A Traffic Management plan showing the area must be included with this application. It should clearly show the boundary of the proposed work area, and the locations of all temporary barriers and road signs.

Also, a suitable scale plan should be included showing the proposed diversion route for vehicles and pedestrians. Adherence to this scale plan will form part of the licence agreement and any required changes by the applicant may result in the need for a new application being made along with the associated fees.

|  |  |
| --- | --- |
| Duration of proposed road closure: |  |
| Estimated start date: Estimated start time:  | Estimated end date: Estimated end time:  |
| 24 hour Emergency contact for duration of works/out of hours: | Name: Telephone No:  |

|  |  |
| --- | --- |
| Reason for road closure.Diversion Route |  |

A part Fee may be refunded if your application is refused or cancelled however charges may apply if the notice has already been sent to legal and/or advertisement.

**Please note: Failure to provide payment will prevent this application from being processed, please see payment or invoice details above.**

**Signed by applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Print Name) ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please ensure that all sections have been completed as failure to provide this information will result in a delay in processing your application.**

London Borough of Havering

NRSWA Section,

 Town Hall, Main Road

 Romford, Essex

 RM1 3BB

🖂 ***NRSWA@havering.gov.uk***