



ROAD OCCUPANCY LICENCE APPLICATION

NON-DEVELOPMENT & SPECIAL EVENT ACTIVITIES

FORM
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Is this an extension of existing / previous licence? No Yes - Licence #. _____
(original attached)

Was this application entered on-line? No Yes - Application #. _____
(on-line print out attached)

CONTACTS	Proponent Organisation		Your Reference No.	
	Proponent Contact Name		On-site Company	
	Phone		On-Site Contact Name	
	Fax		On-site Phone	Fax:
	Email			
LOCATION	Subject Road		UBD Map Reference	
	From (Cross Street)		To (Cross Street)	
	Suburb		Council	
TIMES	Requested Start & End Dates	Enter start date of 1st shift & start date of last shift	Estimated Duration of Activities	Duration for this application ONLY, in number of hours / shifts
	Requested Times	For example Mon - Fri 1000 - 1500 , Sat 0700 - 1300		
PROPOSED ACTIVITIES	Project			
	Work Description for this Application			Current Speed Limit: Km/h
	Licence Type	Abnormal Load Movement Bridge Building Construction Building Work Zone Special Event	Hoardings Hazard Reduction Utility Maintenance SRA Works Other: _____	Investigation Landscaping / mowing Police Operations Crane Site access
	Lane/s or Shoulder/s Closed	Median Shoulder Shoulder Lane 1 (kerb Lane/s)	Lane 2 (next after kerb lane) Lane 3 Lane 4	Total no. of lanes to be closed at any one time? (in same direction): _____ lane(s) of _____
	Direction	All directions East bound West bound	East and West bound North bound	North and South bound South bound
	Flow Management	Standard lane merge Contra Flow Stop / Slow Control	Detour (other roads) Detour (side-track) Portable Signals	Mobile works Short term / Intermittent works Non-Trafficable Area
Miscellaneous	Turning Bay/s affected? Yes No	Speed reduction? Yes _____ km/h (Apply for SZA) No _____	Community Notification Newspaper VMS Letterbox drop	
RTA	If this project is managed by the RTA, fill in the following:			
	RTA Branch:	RTA Contact:		
Please allow a minimum of 10 working days to process this application. I hereby apply for a Road Occupancy Licence:				
Signature: _____			Date: _____	

Fax to the RTA office relevant to the location of the application. Refer to Explanatory Notes for fax numbers.