



TEMPORARY ROAD CLOSURE APPLICATION FORM

APPLICANT DETAILS	
Applicant Name	
Contact Person	
Contact Phone Number	
Email Address	
Postal Address	

PROPOSED ROAD CLOSURE DETAILS	
Date/s of road closure	
Time of road closure (Start/End)	
Name of road/s for closure	
Reason for closure	
Further details	

I/We understand that the Western Bay of Plenty District Council (Council) is the Road Controlling Authority for all local roads, footpaths and berms within the Western Bay of Plenty district pursuant to the Local Government Act 1974.

I/We understand that I/We will be required to compensate Council for any damage incurred in relation to the temporary road closure and that I/we may be penalised pursuant to section 357 of the Local Government Act 1974.

I/We understand that the road includes the footpath, berm and road surface. I/We understand that the above list is not exhaustive. I/we understand a road includes all legal roads whether formed or unformed.



I/We understand that Council is required by the Transport Regulations 1965 to publically advertise the temporary road closure **at least 42 days** before the proposed closure. This is to allow for any objections from the public to be received and considered by Council. **Please note;** this application form needs to be received by Council at least **60 calendar days** before the proposed road closure. WestLink BOP process and approve these applications on behalf of Council.

I/We understand that Council reserves the right to reject the application for temporary road closure. I/We understand that the road closure cannot proceed without the consent of Council/WestLink BOP.

I/We understand that if Council consents to my/our temporary road closure that I/We will be required to indemnify Council against all claims, losses, damages and costs incurred by Council in relation to the event by obtaining **public liability insurance to the value of \$1,000,000.00.**

I/We confirm that I/we have/will comply with all other statutory regulations that may be applicable in relation to the temporary road closure.

Signature

Signatory Name

Organisation Name

Organisation Role

Date

Please email this signed form at least **60 calendar days** prior to the proposed road closure to the: Customer Relationship Team at customer.service@westernbay.govt.nz or post to: **The Engineering Systems Technician,** Western Bay of Plenty District Council, Private Bag 12803, Tauranga Mail Centre, Tauranga 3143.

Your application will be passed on to WestLink from Council for processing and approval. For further information please contact our Customer Service Team on 07 571 8008 or 0800 926 732.

Office use only
Date application received: