

**STREET PARTY ROAD CLOSURE**

Event name: ….………………………………………………………….…………………....

Date and time of event: …………………………………………………..………………….

Location of event: ….………………………………………………………………………....

Approximate number of attendees: .………………………………………………………..

Organiser Name, Contact Address, Phone Number and Email Address:

……………….….………………………………………………………………………………

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**I have read the information on the following websites and understand how to meet basic legal requirements**.

<http://www3.hants.gov.uk/trafficmanagement/public-events/street-party-advice.htm>

<https://www.eastleigh.gov.uk/our-community/events/running-an-event.aspx>

**Please delete below as required**

1. Public Liability Insurance has been provided  **Yes / No**

(if yes copy attached).

2. The event will be held in a **cul-de-sac / through road / pavement / grassed area**

3. Road to be closed and extent of closure (please also attach a map – hand

drawn is fine).

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…………………………………………………………………………………………

4. This is a residential street where all residents are invited – (please attach a copy of letter sent).

5. Appropriate road closure signs must be in place.

6. Traffic will be able to divert via …….…………………………………………… and **signs will be in place throughout the event / no diversion is necessary (cul-de-sac).**

7. All residents’ cars to be on their driveways or parked securely and considerately elsewhere.

8. Access arrangements for emergency services must be made.

9. **We have / need** road signs and barriers.

Additional information: (i.e. other licences that may be required - as indicated on the websites referred on the front of the form)

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**There is a charge for implementing a road closure. By signing this form and supplying an invoice address you are agreeing to the payment of these fees. We will confirm the cost when you apply.**

Invoice Address

(if different from contact

address supplied above)

**Don’t forget to:**

* **Include a road closure plan (showing the section of road to be closed and location of signs), with diversion route if applicable.**
* **Make sure access arrangements are in place in case of an emergency.**
* **Inform all residents affected of the event in writing and enclose a copy of the letter.**

*I confirm I have read and understood the above. I understand that supplying insufficient information will delay my application.*

Signature: ……………………………………………………

Print Name: ………………………………………………….

Date: ………..………………………………………………..

**Should you have any questions please contact the Traffic Team, via our Customer Service Centre, on 023 8068 8000 or** [engineers@eastleigh.gov.uk](mailto:engineers@eastleigh.gov.uk)

**Please return this form to either:**

[engineers@eastleigh.gov.uk](mailto:engineers@eastleigh.gov.uk)

Transportation & Engineering , Eastleigh Borough Council, Eastleigh House

Upper Market Street Eastleigh, SO50 9YN