

**HIGHWAYS ACT 1980 – SECTION 171 APPLICATION TO**

**MAKE EXCAVATIONS IN THE HIGHWAY**

**(NOT INVOLVING INSTALLATION OF APPARATUS)**

**NB: IMPORTANT INFORMATION**

Applicants not familiar with the requirements of this legislation are strongly advised to appoint a contractor with the appropriate knowledge with proof of relevant training and accreditation to help complete the application and conduct the works on their behalf.

All works must fully comply with the latest edition of the specification for the reinstatement of openings in the highways and safety at street works and road works a code of practice. Failure to comply could result in a daily charge of £10.00 without prejudice to any other liability.

All applicants must produce details of public liability insurance cover to a minimum value of £5,000,000 per incident. Failure to supply details will result in the application being refused.

Contact should also be made with all relevant statutory undertakers, to ascertain the location of any apparatus in the vicinity of the proposed works. All applicants must indicate what traffic management type will be required to carry out the works. A sketch or detailed CAD drawing may be required and will form part of the overall approval process.

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| --- | --- | --- | --- | --- |
| **Client Contact Details:** | | **Contact Name:** |  | |
| **Address:** |  | |
| **Postcode:** |  | |
| **Telephone:** |  | |
| **Contractor Contact Details:** | | **Contact Name:** |  | |
| **Address:** |  | |
| **Postcode:** |  | |
| **Telephone:** |  | |
| **Proposed Start Date:** | | | |  |
| **Proposed End Date:** | | | |  |
| **Works Description:** (please give brief details of the works to be undertaken) | | | | |
| **Location Street USRN:** | | | | |
| **Location Street Name:** | | | | |
| **Easting:** | | **Northing:** | | |
| **Location Description:** (i.e., Verge, footway, carriageway.) | | | | |
| **Traffic Management Type:** (please indicate the type required; only one type per Initial Notice per form please) | **1 – None / Signing Only** | | |  |
| **2 – Traffic Control (Stop/Go Boards)** | | |  |
| **3 – Traffic Control (Give & Take)** | | |  |
| **4 – Traffic Control (Priority Working)** | | |  |
| **5 – Traffic Control (Convoy Working)** | | |  |
| **6 – Lane Closure** | | |  |
| **7 – Contra-Flow** | | |  |
| **8 – Road Closure (TTRO Required) *(separate application form will need to be completed) here is the link:*** <https://www.bathnes.gov.uk/services/streets-and-highway-maintenance/highway-improvements-traffic-management/temporary-traffic> | | |  |
| **9 – Temporary Traffic Signal Controlled Crossing** | | |  |
| **10 – Temporary Signals *(separate application form will need to be completed****) please contact Street Works by email to request an application.* | | |  |
| **Comments:** (any relevant additional notes) | | | | |
| Please email your form to: [**street\_works@bathnes.gov.uk**](mailto:street_works@bathnes.gov.uk) **(subject –Section 171 Application) Please provide a minimum of 10 days notice before work start - failure to issue this notice could result in a delay of the works. A fee of £233.00 is to be paid by B&NES portal link which will be sent via email following approval of your application by a Street Works Coordinator.** | | | | |
| **Approved: Yes / No**  **Approval Reference: ARN-114-** | | | | |
| **Response Comments/Condition:** | | | | |
| **IMPORTANT - After the works are completed, please complete the form on page 3– *Certificate of* *Completion and email* to** [**street\_works@bathnes.gov.uk**](mailto:street_works@bathnes.gov.uk) | | | | |
| **Approved by:**  **Date:** | | | | |



**Certificate of Completion**

**Reference ARN -114-**

Dear Sirs

I/We have now completed the works at ……………………………………………

…………………………………………………………………………………………..

and it is available for your final inspection.

Signed: ………………………………………………………..

Name: ………………………………………………………...

Address: ………………………………………………………..

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Date: ……………………………………………………….