

Adran Lle a Seilwaith

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Department of Place & Infrastructure

Street Care / NRASWA Section
Block 1, Parc Myrddin, Richmond Terrace, Carmarthen, SA31 1HQ
Tel: (01267) 224507/08/09

E-mail: streetcare@carmarthenshire.gov.uk

HIGHWAYS ACT 1980

APPLICATION for CONSENT to undertake CONSTRUCTION OF BUILDINGS (EXTERNAL INSULATION) over a HIGHWAY under the provisions of Section 177 of the Highways Act 1980.

SECTION 1 - APPLICANT DETAILS		
Name and Address of Property Owner:	Name and Address of Agent:	
	(All correspondence will be sent to this address)	
Tel. No: Email:	Tel. No: Email:	
SECTION 2 - LOCATION AND DESCRIPTION OF PROPOS	SED WORKS	
Address of Property affected by proposed works (if di	fferent to owner's address):	
D 101 (15)		
Road No (if known):		
Annual of the Ulahaman official at Name 1	word 1 Contract 1 Doddon I	
	way [] Carriageway [] Backlane []	
(Please tick)		
Description of Doors and Market		
Description of Proposed Works:		
Existing Footway / carriageway width:		
Existing Footway / Carriageway width.		
Estimated Width of Works:	Proposed projection over the highway:	
(Metres / Millimetres)	(Metres / Millimetres	
Estimated Duration of Works:	Clearance above highway level:	
Estimated Daration of Works.	(Metres / Millimetres	
Proposed Start Date:	Proposed Finish Date:	
Proposed Start Date.	Proposed Fillish Date.	
SECTION 3 - DETAILS OF PERSONS/CONTRACTOR UND	DERTAKING WORKS	
SECTION 3 - DETAILS OF FERSONS/CONTRACTOR UND	PENTANING WORKS	
Nome and Address of the Contractor (if Irrayun).		
Name and Address of the Contractor (if known):		
Tel. No:	Email:	

NOTE: The applicant <u>must</u> provide details of the Contractor prior to any works being undertaken in the highway.

SECTION 4 - INDEMNIFICATION AND INSURANCE

licence fee.

Indemnification.	
The Applicant shall indemnify the Authority against any claim in respect of injury, damage or loss arising ou execution by any person of any works authorised by the consent.	ut of the
The indemnity provided by the Policy should not be less than £5,000,000 for any one accident or any one claim	
Insurance Certificate	
I/We hereby certify that I/we hold the undermentioned policy with (Name of Insurance Company):	
Policy No.: Expiry date:	
(The applicant is required to provide proof of the insurance cover).	
SECTION 5 - PLANS	
The following plans must be submitted with this application:	
1. Copy of Site plan to a Scale not less than 1/500 showing the applicants property marked in Red and propose	d works.
2. Copy of location plan to a scale not less than 1/1250 or 1/2500 or 1/10,000 showing location of site in relation surroundings.	ion to its
SECTION 6 - DECLARATION	
I confirm that the foregoing details are correct, and acknowledge that the works referred to above must be considered in accordance with the requirements of the Highways Act 1980, New Roads And Street Works Act 1991, Regulations and Codes of Practice, Health and Safety at Work etc Act 1974 and relevant legislation, together conditions imposed by the Highway Authority in the consent.	enabling
Signed: Date:	

 $Completed \ application \ to \ be \ returned \ to \ \underline{streetcare@carmarthenshire.gov.uk} \ or \ to \ the \ postal \ address \ above.$

Once your application has been logged, you will be provided with a reference number and payment options for the