



OPERATIONS DEPARTMENT, FINGAL COUNTY COUNCIL, GROVE ROAD, BLANCHARDSTOWN, DUBLIN 15
TELEPHONE: (01) 8905000 EMAIL: roads@fingal.ie

APPLICATION FORM – TEMPORARY ROAD CLOSURE
(IN ACCORDANCE WITH SECTION 75 OF THE ROADS ACT 1993 - 2015)

6 WEEK MINIMUM ADVANCE NOTIFICATION

Applicant's Name (in block letters): _____

Company Name (in block letters): _____

Address for Correspondence: _____

Email _____

Telephone No. _____ Fax: _____ Contact Name _____

Details of closure

Road/Street Name _____

Dates Closed: from _____ To: _____

Hours Closed: from _____ To: _____

Reason for Closure: _____

Only complete this section if it proposed to close the road in stages:

Section	To	Date	Date	Hours
From		From	To	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	

Where the road closure impacts on a Traffic Management Scheme please complete:

Length of Pay & Display affected: _____

No. of Paid Parking Bays affected _____

Schedule of fees for closures

- €1,000 – road closed 2 days or less
- €2,000 – 3 days to 7 days inclusive
- €5,000 – 7 to 28 days inclusive
- €7,000 – greater than 28 days

Additional charge of €200 per day applies where a closure exceeds the number of days applied for.

All the above fees are non-refundable.

Additional Advertisement Costs will be charged once the final advert has been placed in the Newspaper.

A traffic management plan (see condition no. 2) must be submitted with all applications.

DECLARATION

I hereby apply for approval for a temporary road closure and agree to be bound by the general conditions listed on page 1 and any specific conditions imposed by Fingal County Council.

I agree to comply with the provision of the agreed works statement/traffic management plan.

I hereby undertake to maintain a public liability insurance policy with a minimum limit of indemnity of €6.5m for a single claim indemnifying Fingal County Council against all claims, proceedings, liabilities, losses or expenses of whatever nature arising as a result of the temporary road closure.

Signature of Applicant _____ Date: _____

FOR OFFICE USE ONLY

Temporary removal/replacement/reinstatement of road markings _____

Temporary suspension of parking bays _____

Particular Conditions _____

Approved Officer _____ Date: _____

Checked by: _____ Date: _____

Chargeability Code (Fingal County Council Applicant only) _____

Conditions

1. Application will be made a minimum of six weeks prior to the proposed closure date to allow for processing of applications and advertising.
2. The applicant must submit a Traffic Management Plan which details the proposed diversion route(s). The plan will also give details of:
 - Provision for pedestrians and local access
 - The location and details of signage.
 - Map outlining the closure

(NB – if the submitted traffic management plan is not acceptable to the Council it will be returned to the applicant and the entire road closure application may be suspended until such time as a satisfactory traffic management plan is submitted)

3. The applicant must indemnify Fingal County Council against all claims, proceedings, liabilities, losses or expenses of whatever nature, however arising in connection with the road closure for the period and times during which the road closure is in place.
4. The applicant will pay, where appropriate, any other expenses incurred by the Council such as the suspension of parking bays, the temporary removal and replacement of traffic signs or the temporary replacement of road markings. Any such payment will be made prior to the insertion of the second advertisement.
5. Residents who will be affected by the road closure, must be notified in writing a minimum of 7 days in advance of the road closure.
6. Any breach of these conditions may result in the withdrawal of the road closure.

Tá leagan Gaeilge den fhoirm seo ar fail.

