# Diamond Jubilee road closure request form

# Contact details

#### 1 Name:

- 2 **Organisation** (if applicable):
- 3 Contact address (including postcode):

4 Daytime telephone:	5 Evening telephone:
6 Mobile phone:	7 Email:

# **Closure details**

### 8 Name of road(s) to be closed:

Date of road closure:	10 Time of road closure:	From	to
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## 11 If you plan to close only a section of the road(s), where will the closure begin and end?

From

to



12 Please give a brief list of properties affected. This means any property – residential or commercial – which is located on or accessed only by the road(s) you wish to close (e.g. Cedars Close, numbers 1 to 20 and numbers 21 to 98):

<ul> <li>13 Are any of the roads used by through traffic? If yes, please attach a copy of your proposed diversion route with this application. This should include: <ul> <li>a map and description of the diversion route;</li> <li>the proposed location of signage to divert traffic, along with details of the signs you plan t</li> <li>as much onformation as possible about the volume and types of traffic that will use the di Applications to close main roads are unlikely to be supported – have you considered holding </li> </ul></li></ul>	version route.	No / in a quieter road?
14 <b>Are you planning on closing a road that is part of a bus route?</b>	Yes	No
If yes, you will need to consult Southern Vectis and attach a copy of their response with this	application.	
15 Will access for emergency vehicles (if required) be readily available at all times? In the interests of safety it is highly recommended that roads are accessible for all emergency declined unless suitable alternative access is arranged.	Yes	No
16 Please enclose a copy of your event poster/invitation if you have one.		
Please return this form by post to: <b>Traffic Management, Highways and Transport, County Hall, Hight Street, Newport, Is</b>	le of Wight PO3	0 1UD

Or email it to trafficmanagement@iow.gov.uk

For more information please call 823777