

**Application to hold a Special event on a Public Road**

*Please read the ‘guidance notes for promoters of events’ before completing this form*

|  |  |
| --- | --- |
| **ABOUT YOU** |  |
| Name of Promoter |  |
| Name of contact (if different from above) |  |
| Position/role of contact |  |
| Confirm if you have authority to act on behalf of the company/club/society | Yes No  |
| Address of promoter and/or contactPostcode |  |
| Telephone Number(s) |  |
| Emergency Contact No |  |
| Email address |  |
| **ABOUT THE EVENT** |  |
| Name of Event |  |
| Date of event |  |
| Purpose and nature of event |  |
| Can the event be held on other than a public road? |  |
| **POSSIBLE IMPACT** |  |
| Name of road(s) on which event is to be held along with a detailed, marked up location plan |  |
| Date and Start time of proposed road restriction |  |
| Date and End time of proposed road restriction |  |
| Type of restriction (full road closure/lane restriction/prohibition of certain types of vehicles/footway closure etc) |  |
| Is this a small event? |  |
| How many people are you hoping will attend your event? |  |
| Is a signing schedule enclosed? | Yes/No |
| Is a signing schedule enclosed? | Please list all Roads which will be signed as diversionary routes. |
| Is a traffic management plan enclosed? | Yes/No |
| Has this event been held previously? | *Yes/No* |
| If yes, are the arrangements previously applied for amended in any way | *Yes/No/Not applicable* |
| Please give details of any structure or equipment to be erected on the public road as part of the event |  |
| Can you confirm that public liability insurance will be provided in the event of an Order being granted? | *Yes/No* |
| Please give details of any businesses and residents which may be affected by the event and provide confirmation that they have been contacted |  |
| Is a bus route affected (public and/or Education authority) |  |
| Please provide any other information that you feel may assist us with processing your request |  |

I confirm that I have read the Department for Infrastructure ‘Special Events on Roads - Guidance for Promotors of Events’ and understand that the District Council may apply all or any of the conditions as it feels necessary. I also understand that the District Council may request any further information that it feels necessary to process this application and that my application may not proceed if I fail to produce this additional information.

 *I acknowledge the following Data Protection Statement: In order to comply with the requirements of the Data protection Act 1998, we would advise you that the personal information you provide on this form will be processed and held by the District Council and its agents, for the purpose of managing and operating special events on roads applications. The District Council may use non-personal statistical data collected to analyse current, and plan for future, operational purposes. The District Council will investigate all cases of alleged fraudulent use and the information you have provided may be used in conducting these investigations. The personal information you provide may be checked with other agencies/organisations. If consent to these arrangements is not given you application will NOT be processed.*

I understand I may be required to provide a minimum of £10m public liability insurance cover for this event. I can confirm the details provided in the application are true and correct.

Signature of applicant …….……………………………………………………………………………………………… (on behalf of organising committee)

Date of application ………………………………………………

*Quick Check….Have you included:*

|  |  |
| --- | --- |
|  | *Application fee*  |
|  | *Location plan/map showing marshals/stewards and first aid positions* |
|  | *Signing schedule* |
|  | *Copy of Public Liability Insurance* |
|  | *Traffic Management Plan* |
|  | *Details of Consultees and feedback received (bus providers, residents, businesses)* |
|  | *Copy of a Sector Scheme 12ab (or Ch8) Certificate of Competence for those undertaking the signing work* |
|  | *Written agreement with Emergency Services* |

Please return the completed application form, accompanying documents and fee to:

Environmental Services Department

Licensing Section

Riada House

14 Charles Street

Ballymoney

BT53 6DZ

Telephone: 028 2766 0233

Please see table below for fees:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type of Event | Admin Cost | Advertising Cost | Refundable Deposit | **APPLICATION FEE** | Total Proposed Cost – (if deposit returned) |
| Community – (Not for Profit) | £0 | £0 | £200 | **£200** | £0  |
| Commercial/Business | £165 | £250 | £200 | **£615** | £415 |