



## Mildura Rural City Council

### TEMPORARY ROAD CLOSURE APPLICATION

Applicant

Name:	_____
Address:	_____
Phone:	_____

Street:	_____
From:	_____ To: _____
Dates:	_____
Purpose:	_____

#### TEMPORARY ROAD CLOSURE CONDITIONS

1. Applicant to obtain a Road Opening Permit when works are required to be carried out within the road reserve.
2. The advertisement is to be placed in the Public Notice section of the newspaper under the project owner's logo. You must provide the logo to the appropriate newspaper. You must give at least two (2) days notice to motorists and residents of works to be carried out. Eg. Works to be carried out on a Saturday must be advertised in the Thursday edition of the newspaper.
3. Applicant to complete Temporary Road Closure Advice and notify immediate users, bus and taxi companies and all Emergency services of the intended Road Closure.
4. Applicant to provide a traffic management plan and erect all necessary signs according to the relevant Australian Standards (AS 1742.3) provide workmen with Stop/Slow bats as required.
5. Mildura Rural City Council expects that the Applicant will ensure that work carried out on Council roads or within the road reserve meets with relevant OH&S standards.
6. It is the applicant's responsibility to repair or replace any damage to road surfaces, nature strips, road furniture and utility services to the appropriate authority's satisfaction. All costs associated for damages are responsibility of the applicant.
7. At all times the safety of the public is to be maintained by the applicant.

Documents provided:  Certificate of Insurance  Traffic Management Plan

***In the case of any breach of the aforementioned conditions, Council will execute works required to comply therewith, with the applicant being invoiced for the works. In the event that payment is not forthcoming Council will take legal action to recover monies outstanding. I understand and accept all of the above requirements, conditions and will abide by them.***

Date: \_\_\_\_\_ Applicants Signature \_\_\_\_\_

Date: \_\_\_\_\_ Approved by: \_\_\_\_\_  
Signed Name



Mildura Rural City Council

**PUBLIC LIABILITY INSURANCE INDEMNIFYING COUNCIL**

The Contractor shall at all times whilst providing services to Council, be the holder of a current public liability policy of insurance ("the public Liability Policy") in respect of the activities specified in the Indemnity & Release Guarantee in the joint names of the Contractor, its sub contractors and the Council, providing coverage for an amount of at least \$10 million. The Public Liability Policy shall cover such risks and be subject only to such conditions and exclusions as are approved by the council.

**INDEMNITY AND RELEASE GUARANTEE**

I, .....  
(Duly Authorised Officer of Company)

Of, .....  
(Address)

In the State of Victoria, .....  
(Occupation)

In consideration of the following activity, .....  
.....

Hereby agree with the Mildura Rural City Council (Council) that I will indemnify and keep indemnified and hold harmless Council, its servants and agents and each of them from and against all actions, costs, claims, charges, expenses and damages whatsoever which may be brought or made or claimed against Council or myself or both however arising out of or in relation to the above activity.

Dated this ..... day of ..... 20.....

Director: .....

Name: .....

Address: .....

Name of Company: .....

Signature: .....

Insert Project  
Owner logo here

**NEWSPAPER ADVERTISEMENT**

**TEMPORARY ROAD CLOSURE –** .....  
[Name of Street]

Motorists and residents are advised that.....  
[Name of Street]

Between.....and.....  
[Cross Street] [Cross Street]

Will be closed to vehicular traffic on .....  
[Date]

Between the hours of.....and.....  
[Start time] [End time]

By .....  
[Organisation]

For the purpose of.....  
[Describe works]

.....regrets any inconvenience caused.  
[Name of Organisation]

**Emergency contact:**

Name: ..... Number: .....  
[Organisation Contact Name] [Contact Phone Number]

\_\_\_\_\_

Date: ..... Applicants Signature: .....

Date: ..... Approved by: .....  
Signed Name

Insert Project  
Owner logo here

**TEMPORARY ROAD CLOSURE ADVICE GUIDELINE**

**To Whom It May Concern:**

We .....  
[Applicant]

Propose to temporarily close.....  
[Name of Street]

Between.....and.....  
[Cross Street] [Cross Street]

On .....between the times of.....and.....  
[Date] [Am] [Pm]

For the purpose of.....  
[Details]

..... regrets any inconvenience caused.  
[Applicant]

**Emergency Contact:**

Name: .....

Business: .....

Number: .....