**LONDON BOROUGH OF MERTON**

**NRSWA Section 50 Application Form**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| LICENCE  NUMBER |  | | RECEIPT  NUMBER | | |  | PERMIT  NUMBER | |  |
| TO BE COMPLETED BY THE LONDON BOROUGH OF MERTON NETWORK COORDINATION TEAM | | | | | | | | | |
| **APPLICATION APPROVED** | | | | **YES** | **NO** | **CONFIRMED START DATE** | |  | |
| **SIGNED** | | **PRINT NAME** | | | | **CONFIRMED END DATE** | |  | |

**In order to process your licence, you need to ensure the following:**

1. **Enclose Completed Application form - Missing/Incorrect details will cause delays.**
2. **Provide Site plan & traffic management plan for all road users (where applicable).**
3. **Provide Emergency Contact number (24 hours).**
4. **Pay Application Fee as per below table and associated deposit.**
5. **Provide copy of public liability insurance, risk assessment and method statement.**
6. **Provide a copy of notification letter to business and residents (where applicable).**
7. **Provide proof of parking suspensions or temporary traffic order (where applicable).**
8. **Provide Copy of NRSWA 1991 Operatives and Supervisors Accreditation.**
9. **Allow a minimum 10 working days prior to start date for applications**
10. **Apply for any renewals a minimum of 10 days prior to end date.**
11. **Provide a contactable number – If we are unable to make contact your application will be refused.**

**PLEASE INDICATE DURATION OF Section 50 REQUIRED**

|  |  |  |  |
| --- | --- | --- | --- |
| **0–3 Days (£840) Minor** |  | **11+ Days (£1120 Per Month) Major** |  |
| **4–10 Days (£980) Standard** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **APPLICANT / LICENCEE NAME**: (Applicants should be the person who ensures the conditions of the licence are met and supply public liability insurance) | | | |
|  | | | |
| **COMPANY NAME:** | | | |
| **COMPANY ADDRESS:** | | | |
| **EMAIL ADDRESS:** | | | |
| **PHONE NO:** |  | **CONTACT NAME:** |  |
| **24HR CONTACT NO:** |  | **24HR CONTACT NAME:** |  |

|  |
| --- |
| **NAME OF ACCREDITED SUPERVISOR:** |
| **DATE ACCREDITED:** |
| **ACCREDITATION NUMBER:** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Details of Proposed Works Location** | | | | | | |
| Location of Works (inc. property no.): | | | |  | | |
| Road Name where excavation is to take place: | | | |  | | |
| Description of Works: | | | |  | | |
| F/W  C/W  Verge | Length | Width | Depth | Coordinates | | Surface Type |
| Easting | Northing |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Do the works entail directional drilling or moling? | | | | | | YES /NO |
| Is this an extension of an existing licence? Y/N | | | |  | | |
| Estimate start date of works: | | | | Extension Start Date: | | |
| Estimate completion date of works: | | | | Extension End Date: | | |
| Duration of works (days): | | | |  | | |
| **Note: Please attach a Traffic Management plan with this application** | | | | | | |

**INSURANCE AND INDEMNITY DETAILS**

**I hereby undertake to indemnify London Borough of Merton against any claims for which I am obliged to indemnify the Council under paragraph 8 of Schedule 3 to the New Roads and Street Works Act 1991 and for this purpose to maintain an insurance policy to cover any liability up to £5,000,000 for any such claim and to produce the policy to the Council upon demand together with the receipt for the last premium.**

|  |
| --- |
|  |
| **NAME OF INSURANCE COMPANY:** |
| **POLICY NUMBER:** |
| **EXPIRY DATE:** |
| **NAME OF COMPANY INSURED:** |

**Traffic Management & Network Coordination**

**Please indicate where licence is required:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Footway |  | Cycle Lane |
|  | Carriageway |  | Private / Forecourt |
|  | Verge |  | Public Right of Way |

**Please indicate what traffic management is required:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Road Closure |  | Stop/Go Boards |
|  | Contraflow |  | Give and take |
|  | Lane Closure |  | Priority working |
|  | Convoy Working |  | Some carriageway incursion |
|  | Multi-way Signals |  | No carriageway incursion |
|  | Two-way Signals |  | No traffic management |

**IMPORTANT NOTES**

**Please note that Merton’s Network Coordination Team requires a minimum of 10 working days notice to consider an application and agree a start date. This is because we have to perform road space coordination for potential conflicts, inform statutory utility companies of the works and the intention to issue a licence.**

**Should a temporary traffic order be required, this will take 8 weeks to process. Please note there will be an additional charge for the suspension of any parking bays. To suspend pay & display or CPZ parking bays please contact** [**parking@merton.gov.uk**](mailto:parking@merton.gov.uk) **(Charges may vary depending on the location).**

**You must contact the Council’s Network Coordination Team who can advise on all aspects of the NRSWA Act 1991 and will carry out site inspections during and at the end of the works. Please note that you will need special permission for use of portable traffic signals.**

**Should you wish to store materials, compounds, containers, portable toilets on the highway, you will require an additional licence to cover these activities. Please contact the Network Coordination Team.** [**network.co-ordination@merton.gov.uk**](mailto:network.co-ordination@merton.gov.uk)

**DEPOSIT AND APPLICATION COSTS**

**Merton Council will require a deposit of which will be determined by an Officer of the Council. The deposit for Section 50 licences will be returned after the 2-year guarantee period, and once the Council has received your closing notice and the site inspection has confirmed the works are satisfactory.**

**(You should note that any costs incurred by the Council as a result of the works will be deducted from your deposit or recharged to you).**

**LICENCE AGREEMENT**

**In making this application the named applicant shall:**

1. **Agree to pay the charge associated with the restriction as set out in the ‘Councils’ schedule of fees/rates**
2. **Agree to fulfil the standard conditions.**
3. **Recognises that the Council may impose Additional Conditions specific to this particular application.**
4. **You should note that any costs incurred by the Council as a result of the licence will be recharged to you.**

**Please note you can use any of the following methods to pay:**

* **By BACS**
* **By credit card / debit card – If you wish to use this facility, please call 0208 545 4124**

**Please return completed application to** [**Network.Co-Ordination@merton.gov.uk**](mailto:Network.Co-Ordination@merton.gov.uk)

**APPLICANT SIGNATURE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SUBMITTED BY** | **SIGNATURE** |  | **PRINT NAME** |  | **DATE** |  |