

Ref:



Highways Licencing Application Form

Before completing this application, please ensure that your proposal fully complies with the Durham County Council "Highways Licencing Policy".

1. Applicant

Name:
Address:
.....
Post Code:
Tel No:
Email:

2. Agent

Name:
Address:
.....
Post Code:
Tel No:
Email:

3. Type of Licence (Please tick appropriate box)

Tables and Chairs	<input type="checkbox"/>	"A" Boards	<input type="checkbox"/>
Planting in the Highway	<input type="checkbox"/>	Hiring of Activity Space	<input type="checkbox"/>

4. Site Details

Business Name:
Nature of Business:
Site Address:
Area of Highway to be used:
Minimum clear footway remaining:

5 Equipment (Type related to application)

(For example: No. of tables and chairs)

6. Plan showing the extent of the proposals, including all dimensions and layout

(Basic drawing is sufficient)

7. Days and Times of Use

(Please state what days and times your proposal will be in use)

Declaration

I declare that I am over 18 years of age, I have the authority on behalf of the business named and I certify that, to the best of my knowledge and belief, the information I have provided in the Highways Licencing Application form is both accurate and correct.

Signed _____

Date _____

Print _____

Checklist

Application completed

Public Liability Cover of £5million Evidence

Risk Assessment

Please return your completed form with enclosures to:

Strategic Highways,
Room 464-468,
County Hall,
Durham,
DH1 5UQ