



Central Hawke's Bay  
District Council

## TRAFFIC MANAGEMENT PLAN FORM 2018 - 2019

*Land Transport Dept  
CHB District Council  
Ruataniwha Street  
PO Box 127  
Waipawa 4240*

*Telephone: (06) 857 8060  
Fax: (06) 857 7179*

Office Use Only

<b>Organisation:</b>	<b>Contractor:</b>			<b>Client:</b>	
<b>Contractor Details</b>	<b>Postal Address:</b>		<b>Tel:</b>	<b>Fax:</b>	
			<b>Email:</b>		
<b>Contract Name/ No.</b>					
<b>Location:</b>	<b>Road Name(s)</b>	<b>Road Level (1,2,3)</b>	<b>Speed Limit</b>	<b>From RP</b>	
				<b>To RP</b>	
<b>Description of Activity</b>					
<b>Work Programme</b>			<b>Start Date:</b>	<b>Finish Date:</b>	
<b>Proposed Work Hours</b>			<b>Restricted Work Hours:</b>		
<b>Traffic Details (Main Route)</b>	<b>AADT</b>		<b>Peak Hour Flow</b>		
<b>Proposed Traffic Management Method</b>	<b>Active:</b>				
	<b>Unattended:</b>				
	<b>Night:</b>				
<b>Proposed Speed Restrictions</b>					
<b>Positive Traffic Management Measures</b>					
<b>Contingency Plans</b>					
<b>Public Notification</b>					

<b>Personal Safety</b>		
<b>On-Site Monitoring</b>	<b>Attended:</b>  <b>Unattended:</b>  <b>Overnight:</b>  <b>Other Times:</b>	
<b>Other Information</b>		
<b>Layout Diagrams</b>		
<b>Traffic Controllers</b> <i>(Include a Copy of Training Certificate or Warrant)</i>	<b>STMS</b>	<b>TC</b>
	<b>Name:</b> <b>Cert No:</b> <b>Exp Date</b> <b>Phone (24 hours):</b>	<b>Name:</b> <b>Cert No:</b> <b>Exp Date</b> <b>Phone (24 hours):</b>
<b>TMP prepared accurately to represent site conditions and submitted by:</b>	<b>Contractor/ Applicant:</b>  <b>Signature:</b>  <b>Cert No:</b> <b>Exp Date</b>  <b>Date:</b>	
<b>Engineer Name:</b> <b>Approved</b> <input type="checkbox"/>		<b>Requires Amendment</b> <input type="checkbox"/>
<b>Signature:</b>	<b>Cert No:</b>	<b>Engineer:</b>
<b>Date:</b>	<b>Exp Date</b>	<b>Signature:</b>
		<b>Cert No:</b>
		<b>Date:</b>
		<b>Exp Date</b>

**NB: Please attach the following with this application where applicable:**

*Fees*

- The appropriate layout diagrams*                          **\$58.65 (GL#7101190) - Individual Traffic Mgt Plan**  
*Copy of STMS/ TC Certificates*                          **\$1,530 (GL# 7101190) - Generic Traffic Mgt Plan**

**Purchase Order Number for invoicing:** \_\_\_\_\_

**Fees previously submitted:** \_\_\_\_\_