

WARWICKSHIRE COUNTY COUNCIL COUNTY HIGHWAYS

APPLICATION FOR PERMISSION TO CONSTRUCT VEHICLE ACCESS CROSSING

This application must be completed by the property owner and returned to:

County Highways

Warwickshire County Council
Shire Hall
Market Place
Warwick
CV34 4RL

Tel: (01926) 412515

Email: yaw@warwickshire.gov.uk

www.warwickshire.gov.uk/droppedkerb

A non-refundable fee of £126.00 per application is payable to cover the cost of administration and inspections which will be chargeable on receipt of your application.

Our preferred payment method is online through GOV.UK/PAY. Once your form is received, we will send you a link via email with a payment reference number and instructions on what to do. Alternatively, you can send a cheque made out to Warwickshire County Council with your application form.

Please note your application will not be processed until payment is received.

1. NAME AND ADDRESS OF APPLICANT

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Postcode

Telephone No.

E-Mail Address

Preferred Contact Method **Email** **Letter** (Please Tick)

2. LOCATION OF CROSSING

Address or precise description
if different from above address

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3. LOCATION PLAN

Please provide a simple sketch plan showing the footway and the proposed vehicle crossing in relation to your property. Clearly indicate the road name from which access is required, whether the existing footway surface is slabbed or tarmac. Also, explain why you want to widen the access and how wide you want the new access to be.

Clearly show the dimensions of the area of parking on the frontage noting that the minimum dimension requirement is 5 metres deep at its shortest point by 2.4 metres wide set at 90 degrees to the carriageway.

4. VISIBLE OBSTRUCTIONS

Please indicate on the location plan any visible obstructions on the footway, such as trees, lamp columns, manhole covers or any other street furniture.

5. DECLARATION

I am the property owner or have permission of the property owner. **(PLEASE TICK THE BOX TO CONFIRM)**

I wish to apply for a vehicle crossing at the above location and confirm that the information given on this form is correct.

Signed

Date