

Skips within the Highway – Renewal Application Pack.



Renewal application form to place a skip on the public highway.

Highways Act 1980 - Sections 139 & 140

Amey Highways
Shire Hall,
Westgate Street,
Gloucestershire
GL1 2TG
08000 514514
GCCHighways@amey.co.uk

Gloucestershire County Council will collect personal information to fulfil the application process for the licence applied for and will not use the information outside of this. For full information on how we use and store your information please see the Highways Privacy Notice which can be found at www.gloucestershire.gov.uk/highways-privacy-notice and the section relating to Licences, Permits and Permissions.

GLOUCESTERSHIRE COUNTY COUNCIL REQUIRE A COPY OF THE PERMIT/LICENSE TO BE DISPLAYED THROUGHOUT THE DURATION OF THE WORKS.

Please complete this application in **BLOCK CAPITALS**

Part A: Applicant details (person on behalf of whom the below company is applying)

| | |
|---------------------------------|----------------------|
| Title: | <input type="text"/> |
| First name: | <input type="text"/> |
| Family name: | <input type="text"/> |
| Email | <input type="text"/> |
| Contact No. (inc. area code) | <input type="text"/> |

Part B: Company details

| | |
|---------------------------------|----------------------|
| Company Name | <input type="text"/> |
| Address | <input type="text"/> |
| | Postcode |
| Company Contact | <input type="text"/> |
| Contact No. (inc. area code) | <input type="text"/> |
| Email | <input type="text"/> |

- I/we have read, and agree to comply with, the conditions laid down in the 'Skip Permit – Terms and Guidelines' document.
- I/we confirm the skip will be signed, guarded and lit in accordance with section 3 of 'Skip Permit – Terms and

Guidelines' document.

- I can confirm we hold Public Liability insurance to the value of _____ (minimum value £5 million) and this is held with _____ (name of insurance company) on policy number _____ which is due to expire on _____
- I can confirm we hold a Waste Carriers Licence in the name of _____. The registration number of the licence is _____ and the expiry date is _____.

We wish to apply for a new Skip Permit (You do not need to complete this form - please complete the 'Skip Permit - Application Form' document instead).

We wish to apply for an extension (please provide current permit number): - _____

Is the work the same in nature as that carried out with the above licence? Yes No

Is the skip the same size as the original application? Yes No

If you have answered no to either of the above questions then you do not need to complete this form – please complete the “Skip Permit- Application Form” document instead.

Part C: What type of operation would you like to carry out?

Refer to parts two to five of the accompanying notes. Tick the appropriate box(es) to indicate which type of operation you wish to carry out:

| | | | |
|---|---------------------------|--------------------------|---------------------------------|
| <input type="checkbox"/> | Mini Skip (2-3 Yards) | <input type="checkbox"/> | Midi Skip (4 Yards) |
| <input type="checkbox"/> | Builders Skip (6-8 Yards) | <input type="checkbox"/> | Large Skip (10 Yards) |
| The below options will only be considered after prior consultation and agreement (refer section 2 and 3 of terms and guidelines) | | | |
| <input type="checkbox"/> | Extra Large (12 Yards) | <input type="checkbox"/> | Roll-on, Roll-off (15-20 Yards) |
| Name of AHR : | | Date Agreed: | |
| <input type="checkbox"/> | Lockable | <input type="checkbox"/> | Drop End |
| <input type="checkbox"/> | Lit | <input type="checkbox"/> | Open |

| | | | |
|---|--------------------------|--------------------------|---------------------------|
| What type of traffic management will be used whilst the skip is in-situ? | | | |
| <input type="checkbox"/> | Men at work road signage | <input type="checkbox"/> | Give & Take |
| <input type="checkbox"/> | Stop/Go Boards | <input type="checkbox"/> | Temporary Traffic Signals |

Part D: What works will you be carrying out?

Please describe the work you will be carrying out that requires this equipment be placed on the public highway:

Part E: Where will you be working?

Proposed location/address where the skip is to be deposited:

Site sketch enclosed

Part F: When would you like to carry out the operation?

Please indicate the dates and times you would like the equipment in place. **Note: Applications received stating "ASAP" or "To be confirmed" will not be progressed. Dates to be in format DD/MM/YYYY e.g. 02/04/2018.**

Date from:

Date to:

Position: Carriageway Footpath Verge

Part G: How would you like to pay?

Processing fees, and ways to pay, are detailed in parts one and six of the accompanying notes. Let us know how you would like to pay by ticking the appropriate box below:

- I have enclosed a cheque for the sum of _____ to cover my application.
- Please contact _____ on _____ to take a payment by credit/debit card. The best day/time to call (during working hours) is: _____
- I have a credit account, please add this application to my monthly invoice.

Part H: Who can be contacted regarding this licence?

We may need to contact a representative about the works when they start or in the event of an emergency, often this can be someone other than the person who made the application. **Note: These contact details will be placed on your licence which will need to be clearly placed on the skip when sited on the public highway and on the Council website for the duration of the works.** Please state who we should contact:

Contact Name(s): _____

Contact Numbers(s): _____

Part I: Agreement and Indemnity

We confirm that the details given in parts A to H above are correct.

We hereby agree to indemnify and save harmless Gloucestershire County Council, their servants and agents against all liabilities, costs, expenses, damages and losses suffered or incurred by Gloucestershire County Council arising out of or in connection with the transportation, erection, dismantling and/or use of equipment or machinery, whether by means of defect (latent or otherwise) in the said equipment or otherwise, pursuant to the authority of Gloucestershire County Council granted as a result of this application.

I confirm on behalf of the company named in Part B that I have read and understood both the accompanying notes and the 'Skip Permits - Terms and Guidelines' document and that the aforementioned company will abide by the conditions outlined in these documents and any decision made by Gloucestershire County Council. We acknowledge that Gloucestershire County Council may **at any time** check the information we have provided in our application form/compliance with the terms and guidelines. Where non-compliance is found, remedial action will be taken which may include removal.

Name:

Signature:

Position in company:

Date:

What happens next

Please send your completed application with any necessary supporting documentation by email or post to:

GCCHighways@amey.co.uk

Amey Highways
Gloucestershire County Council
Shire Hall
Westgate Street
Gloucester
GL1 2TG

Once we have received your completed application, supporting documentation and payment we will begin to process your application. We will contact you for payment if you have stated in **part G** of this application form that you wish to pay by credit/debit card.