

# Protect, care and invest to create a better borough



# New Roads & Street Works Act 1991 - Section 50 Street Works Licence Application for Placing or Repairing Apparatus in the Highway Statutory Undertakers Declaration/Requirement Forms (SWL6)

To comply with Section 69 of the Act where street works are likely to affect another person's Apparatus in the street, applicants must take all reasonably practicable steps:

- (a) to give the person to whom the Apparatus belongs reasonable facilities for monitoring the execution of the works and
- (b) to comply with any requirement made by him/her which is reasonably necessary for the protection of the Apparatus or for securing access to it.

All relevant Statutory Undertakers must therefore be contacted before the commencement of any work. Space is provided overleaf for them to indicate their requirements (if any) and these conditions, complete with endorsements, should be presented with your application form.

Please contact each relevant Statutory Undertaker or Highway Authority Department with a copy of your plans. Please enter the date when you contacted each relevant Statutory Undertaker or Highway Authority Department and also the date when you receive them back.

Should the works affect any form of Structure please contact Telford and Wrekin Engineering Department with a copy of your plans.

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#### **IMPORTANT**

All communication relating to this Licence should be addressed to:
Telford & Wrekin Council, Streetworks, Darby House, Telford TF3 4JA / <a href="mailto:streetworks@telford.gov.uk">streetworks@telford.gov.uk</a> / 01952
384000

### **SECTION 50 - STREET WORKS LICENCE**

I have applied to Te	elford & Wrek	in Council	for a Stree	t Works Lice	ence to pla	ce/maintain apparatus at
Address:						
Location						
Location (carriageway, footway and/or verge)						
be affected by these	e works.					e location in question which may
Please treat this as Works Act 1991.	a formal not	ification and	d enquiry a	as to appara	tus under t	the New Roads and Street
Signed:					Date:	
Address (if different from above)						

## STATUTORY UNDERTAKER'S RESPONSE

Undertaker:									
Apparatus affected:	Yes		No						
Location in works:									
Special Requirements:									
Please highlight on plans and return									
Contact Name, Address and Phone Number for further information and queries:									
Name:									
Signed:			Date:						

Company Stamp