

Application form for requesting a parking restriction

This document sets out how you can apply for a parking restriction. All requests are thoroughly investigated and are subject to a democratic process before determining if the request can proceed formally. Details of the process are set out below.

What you need to do:

- Please complete the attached form with as much detail as possible.
- It is recommended that you gather sufficient support for your request. It is also important that a high percentage of people affected by the request are also in full support of a proposal. A petition is included with the attached form if you wish to canvass your neighbours and other residents living in the road.
- Support from your local Ward Councillor and/or your Essex County Council (ECC) Councillor is also advisable.
- Once you have completed the form, send it to:

Post: Traffic Regulation Order Team
South Essex Parking Partnership
Chelmsford City Council
Duke Street
Chelmsford
Essex, CM1 1JE

Email: trafficreg@chelmsford.gov.uk

What happens next:

- The South Essex Parking Partnership (SEPP) Technicians will send it to ECC in the first instance for assessment against their safety and congestion policy criteria.
- If the request meets the ECC safety and congestion policy criteria, ECC will take the necessary action to implement a parking scheme (subject to available funding).
- If ECC Officers decide that the request for a parking restriction has no safety or congestion implications, they will decline the request and advise the SEPP accordingly.
- A SEPP Technician will then be assigned to investigate the request and gather information. This may include site visits and an informal consultation with local interest groups.
- The Technician will produce a report with a recommendation to accept or decline the request. The report will be discussed with the relevant Parking Partnership lead officers and elected Member representative for a local decision on whether to proceed with the scheme. You will be advised of the outcome.
- All schemes agreed locally to progress will then be costed for submission to the SEPP Joint Committee or a relevant Sub Committee to approve the necessary funding to proceed with a proposed Traffic Regulation Order.

Request for parking restrictions

Please use **BLOCK CAPITALS** when completing this form and send it to:

Post: Traffic Regulation Order Team
South Essex Parking Partnership
Chelmsford City Council
Duke Street
Chelmsford
Essex, CM1 1JE

Email: trafficreg@chelmsford.gov.uk

Applicant's name:	_____
Address:	_____ _____ _____
Postcode:	_____
Email address:	_____
Telephone no.:	_____
Signature:	_____

Please state which Ward Councillor(s)/ECC Councillor(s) are in support of your proposal:	
Councillor(s):	_____
Ward:	_____
Town:	_____

What is the problem which has resulted in this request? <i>Describe the issues being faced and the causes of the problem.</i>

Have you read the South Essex Parking Partnership policy on implementing new parking restrictions?

The policy can be found at: <http://www.chelmsford.gov.uk/sepp>

Yes

No

How does your request meet the policy criteria?

What is your suggested solution?*

Please tick one box only to indicate the type of restriction.

Resident Permit Zone (No-one is allowed to park unless they are a resident and have a permit. This can be at certain times of the day)
(complete 'Times of operation detail' box)

Waiting prohibited at certain times (single yellow line) (No-one is allowed to park at certain times of the day)
(complete 'Times of operation detail' box)

Waiting prohibited at all times (No-one is allowed to park)
(double yellow lines)

Other type of restriction
Please state:

Times of operation details:

Days:

Mon

Tues

Wed

Thurs

Fri

Sat

Sun

Hours:

Between

to

and

to

What are the full details of your suggestion solution?

Please write full details of your solution. You may include a detailed sketch or plan

What is to be achieved by the suggested solution?

(Describe how your solution will alleviate the issues described above and what the result that you wish to achieve is.)

What local support can you demonstrate for the proposal?

(Please provide copies of correspondence or petitions that you have received in relation to this location.)

*Traffic technicians will consider the proposal and suggested solution against the problems being experienced and the evidence, including supporting documents provided, to assess the appropriateness. They may recommend an alternative solution as part of this process.

Data Protection Declaration: Chelmsford City Council is a Data Controller for the purposes of data protection legislation. All personal information is held and processed in accordance with this. Please refer to our Privacy Notices published on our website at <https://www.chelmsford.gov.uk/your-council/our-website/privacy-policy/> for details. Please contact us if you need the privacy notice in an alternative format.

If you need assistance to complete this form, please contact the Traffic Regulation Orders Team on 01245 606710.

Request for parking restrictions – Petition form

This request for parking restrictions is being collated by: _____

Address on request form: _____

Location: _____

Type of scheme requested: _____

By signing this form, you are giving support for the proposed parking restrictions as detailed on the request form attached. All entries must be completed in full, otherwise they will be disregarded from this petition.

Name:	_____
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Signature:	_____

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