

TEMPORARY REVOCATION OF PROHIBITION OF DRIVING ORDER

Please complete this form and return it to: info@islandroads.com

| |
|-------------------------|
| <u>APPLICANT</u> |
| Name: |
| Address: |
| Post Code: |
| Telephone: |
| Mobile: |
| Email: |

| |
|------------------------------------|
| <u>SITE CONTACT DETAILS</u> |
| Name: |
| Mobile Number: |

| |
|--------------------------------|
| <u>LOCATION DETAILS</u> |
| ROAD NAME & NUMBER |
| EXACT LOCATION |

THE REVOCATION OF PROHIBITION OF DRIVING ORDER IS IN CONNECTION WITH A ROAD CLOSURE ORDER. A MINIMUM OF 28 DAYS NOTICE IS REQUIRED BY ISLAND ROADS ONCE THE APPLICATION IS APPROVED.

| | |
|--------------------------|------------------------|
| REVOCATION ORDER CHARGE: | £922.50 INC VAT |
|--------------------------|------------------------|

DECLARATION

I HEREBY APPLY FOR PERMISSION TO REQUEST A TEMPORARY REVOCATION OF PROHIBITION OF DRIVING ORDER IN CONNECTION WITH A ROAD CLOSURE ORDER.

SIGNATURE.....DATE.....