**Ref.** /

**Application to place a skip on the highway**

 **HIGHWAYS ACT 1980**

 **Section 139**

**Return form to:**

Communities Directorate

Bridgend County Borough Council

Business Support

Level 3, Civic Offices

Angel Street

Bridgend, CF31 4WB

**Tel:** 01656 642534

**e-mail:**

BusinessSupportCommunities@bridgend.gov.uk

**Applicant:**



**Skip company details:**

**Address**:

………………………………………..

……………………………………….

……………………………………..

……………………………………

……………………

**Tel:**..……………………..........

**e-mail:** …………………………………….

**I/WE HEREBY APPLY for permission under Section 139 of the Highways Act 1980 to deposit or cause to be deposited a builder's skip on the carriageway/ the verge of the highway (or outside the premises) known as:**

………………………………………………………………………………………(**location of skip**)

For a period **from**:…………………………………… **to**: ………………………

I/We accept liability for any damage to the footway or carriageway that may arise by reason of the existence of the skip.

I/We accept liability for any claim or action which may arise by reason of the existence of the skip.

I/We attach/have provided a copy of a current public liability insurance policy in the sum of at least

£ 5,000,000.

I/We accept that guarding equipment will include 6 lamps & 3 cones.

**A charge of £31 will be made upon application. This can be paid by credit or debit card over the telephone.**

**Dated:** …………………………………….. **Signed:** ……………………………………………….

(Please note that a copy of the various Acts and Regulations are available for inspection on request from the above address).

 **FOR DEPARTMENTAL USE**

|  |  |
| --- | --- |
| **Permission Granted** |  |
| **Permission Refused** |  |

**Special Conditions**: …………………………………………………………………………………….

**Print Name:** ………………………..... **Signed:** ……………………………. **Dated:** ……………………….

(Highway Inspector)

 This form is also available in Welsh