

Temporary Road Closure Application Form

Applicant Details

Name

Organisation

Address

Phone

Mobile

Email

Date of application

Closure Details

Reason for Closure

Event name or purpose

Road or road section to be closed

For example Heretaunga Street East from Russell Street to Karamu Road

Closure Period

Eg Tuesday 2nd February 2010 from 10am to 2pm

HDC Use Only

Date Received	
Signed	
Position	