

# APPLICATION FOR TEMPORARY CROSSOVER LICENCE

In accordance with the Highways Act 1980

Information provided will solely be used for the purpose of this application. For further details please view our Privacy Notice at: [www.lambeth.gov.uk/parking-transport-and-streets](http://www.lambeth.gov.uk/parking-transport-and-streets)

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To: Lambeth Environment- Highways Licensing  
PO Box 734 Winchester SO23 5DG  
Tel: 020 7926 0524 Email: [neighbourhoods@lambeth.gov.uk](mailto:neighbourhoods@lambeth.gov.uk)

**To be completed only by person depositing structure on the highway**

## All fields must be filled in

1. I/We hereby make application for a licence to erect or set up a Temporary Crossover  
At (give full site address)

For the purpose of (give concise details):

Start Date:

The said Temporary Crossing will be .....metres in length, and to extend across the public footway to the extent of .....metres, measured from the back of the public footway.  
It is proposed to form the temporary crossing with .....  
which will be laid flush with the adjoining footway paving.

2. I/We undertake and agree to set up and maintain the Temporary Crossover, and continue the licence in all respects to the satisfaction of the Council and in accordance with the statutory provisions attached. I/We acknowledge I/We have carefully read, and agree to conform with the conditions and regulations as stated.

Name of firm/applicant :.....(in capital letters)

Address: .....

..... Postcode .....

Tel: ..... Mob:..... Fax: .....

Email..... Name: .....

Signature: ..... Date: .....

- Please attach a copy of an up-to-date **Public Liability insurance** policy (to the value of not less than £5,000,000) – it is a legal requirement for businesses to have Public Liability Insurance.
- **The licence fee must accompany the application form.**
- Please contact 020 7960 4050 to gain approval for works being carried out within a TFL (red route) area. Separate licences are required where work being undertaken at a property encroaches on two roads (e.g. corner properties) as they come under different licensing jurisdictions. (TFL - red) / Lambeth – all other routes)
- Please provide all information required as the application form will be returned if incomplete.
- On approval, the licence will be posted to address of applicant.
- **20 working days** notice is required to process this application.
- Please contact Parking Shop on 020 7926 6262 to suspend parking restrictions in controlled parking zone (at a fee) if applicable to the location.
- Applicants are particularly reminded of the Town & Country Planning (Control of Advertisements) Regulations 1960.

The Council (where applicable) has given the appropriate consents:

**Non-Refundable Licence Fee:** £576.00 (Including Inspection Fee) valid for 3 months (Subject to change every financial year)

**Renewal Fee:** £384.00 - (Including re-Inspection Fee) Request in writing must be submitted 20 working days before the current licence expires, if not new licence fee will apply

**Deposit Fee:** **To be advised upon site inspection**

**Cheques To:** London Borough of Lambeth  
(Separate cheques for Deposit and Licence Fees - Please also submit the company **BACS** details on a separate **letter-headed** document for refund of deposit fee purposes)

**Post to:** **Lambeth Environment - Highways Licensing**

PO Box 734 Winchester SO23 5DG

**Email to:** [neighbourhoods@lambeth.gov.uk](mailto:neighbourhoods@lambeth.gov.uk)

**Please Note: - Applications cancelled through no fault of the Council will not be refunded.**

# Environmental Services and Highways Credit Card Payment Form

Request for (Type of Licence required):

\_\_\_\_\_

Premises/Site address:

\_\_\_\_\_

Postcode: \_\_\_\_\_

## CARD DETAILS:

Type of card: Delta  Switch  Visa  Mastercard  Solo

Card Number

Security Code

Expiry date: \_\_\_\_\_ / \_\_\_\_\_ Issue Date \_\_\_\_\_ / \_\_\_\_\_ Issue no \_\_\_\_\_ (If applicable)

Amount to be debited: £ \_\_\_\_\_ : \_\_\_\_\_ Signature of cardholder: \_\_\_\_\_

## CARD HOLDER'S DETAILS:

Name on card: Mr/Mrs/Miss/Ms \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

\*\*\* You can email this form to [neighbourhoods@lambeth.gov.uk](mailto:neighbourhoods@lambeth.gov.uk) \*\*\*

For office use only:

Processed by (initial) \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

\*\*\* Please note incorrect forms will lead to a delay in your application being processed \*\*\*