New Westminster

Street Occupancy Permit Application Form

Please allow up to 10 business days to process your Street Occupancy Permit Application. Ensure that your application is complete, and **if necessary**, that your Traffic Management Plan has been carefully prepared by a qualified traffic management professional. Should you have any questions or concerns, please contact the Engineering Department at 604-527-4592 or sop@newwestcity.ca.

APPLICANT NAME:

Applicant Name (Company or Individual):	Prime Contractor (If different from applicant):

Project Owner (Company or Individual):

APPLICANT ADDRESS:

Apt/Unit#	Street	City	Postal Code

Email	Phone	Contact

OCCUPANCY DETAILS:

Expected Start Date:	Expected End Date:	Expected # of active work/occupancy days:

Please specify days and hours of street occupation needs (eg Mon-Fri, Saturday only, 8:00am-3:00pm, 24/7)

Purpose of street occupancy (check one):

- ☐ Moving truck/pod/bin/container
- ☐ Crane Lift
- ☐ Block Party
- ☐ Other
- ☐ Development related
- ☐ Traffic control
- ☐ RV/trailer/motor home
- ☐ Utility construction

Detailed description, including the nature of the work to be completed and a description of all parts of the street to be occupied. (Please note: If pay station/metered parking stall(s) are required, additional rental charges apply.)

Location – address/approximate address of the proposed work

FEES:

Is there a possibility for your work to damage any road, sidewalk or boulevard surface (e.g. drilling holes, excavating, crane lifts or equipment on sidewalks? Refer to the damage deposit page (https://www.newwestcity.ca/services/streets-and-sidewalks/street-occupancy-permit#damage-deposits) for a complete schedule of application damage deposit amounts.

☐ Yes ☐ No

Provide the related city issued permit number for your work (e.g. municipal access permit, building permit, tree permit, etc.)

#_____ ☐ N/A

SUPPLEMENTAL ATTACHMENTS (*if applicable*):
Depending on the nature of your Street Occupancy Permit, you may need to include the following with your application:

☐**Traffic Management Plan** ☐**Proof of Insurance** ☐**Prime Contractor Designation Form**

All approvals are subject to review. The City reserves the right to cancel, adjust, modify or further restrict the hours of operation or traffic control details associated with the request if required. Should you have any questions regarding your application, please contact the Engineering Department at 604-527-4592.

Disclaimer: I confirm that all information I have provided is true and accurate to the best of my knowledge. I have read and understood the requirements for this permit and Part 5 (Permits) of the City of New Westminster's Street and Traffic Bylaw No. 7664 and agree to the terms and conditions as stated on the Street Occupancy Permit I acknowledge that obtaining a Street Occupancy Permit does not absolve me from acquiring or following the requirements and conditions of any other necessary permit. If I have any questions or concerns I will contact the issuing department at 604-527-4592.

I acknowledge that the City reserves the right to amend or vary a Street Occupancy Permit at any time, suspend or revoke the permit for reasons of public safety, or if permit holder fails to comply with the terms and conditions of the Permit.

The City of New Westminster is committed to protecting your privacy. This information is collected by the City of New Westminster under Section 26(c) of the Freedom of Information and Protection of Privacy Act and will be used for the purpose of administering the Street Occupancy Permit online application service to you. Should you have any questions about the collection of this personal information please contact the FOI and Privacy Coordinator, 511 Royal Avenue, New Westminster, V3L 1H9, 604-527-4523, privacy@newwestcity.ca.

☐ I Agree

Office Use Only Date Received: _____ Folder #: _____
Deposit (if required): ____ Proof of insurance (if required): _____ Prime Contractor Form (if required): ____

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