



# WORK NOTIFICATION/LANE CLOSURE REQUEST AND APPROVAL

**NOTE:** This form is to be submitted ten (10) working days prior to start of work or closure. The TMCBC requires 24/7 emergency phone numbers for all projects.

Permit Number	Date (yyyy/mm/dd)
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## TO FROM

District Office: District Manager/Designate: Phone:                      Email:	Organization: Contact Person: Phone:                      Email:
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on Highway                      between                      and

I request approval to work with in the Ministry right-of-way (check as many boxes below as required):

Northbound	Southbound	Eastbound	Westbound
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I request approval to close the Ministry right-of-way (indicate what will be closed by checking all applicable boxes below):

Right Turn Lane	Middle Lane	Left Turn Lane	Work on Shoulder	Cyclists/Pedestrians	Single Lane Alternating Traffic
Curb/Outside Lane	Centre/Inside Lane	All Lanes	No Lane Closure	Bridges/Intersections	

Time of Day:                      AM                      PM                      to                      AM                      PM                      Dates:                      to

Days of the Week:                      Monday                      Tuesday                      Wednesday                      Thursday                      Friday                      Saturday                      Sunday

For the purpose of performing the following works:

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In the above noted direction, the highway is                      one (1)                      two (2)                      three (3) or more lanes wide and                      zero (0)                      one (1)                      two (2) lanes of traffic will be maintained in the same direction as the closure.

Restrictions: Are there restrictions to (check all that apply)                      Weight                      Height                      Width

Would this closure impede extraordinary loads?                      Yes                      No

## PLEASE ATTACH THE FOLLOWING

- A) Traffic control diagram figure number                      as per "[Traffic Management Manual for Work on Roadways](#)";
- B) A detailed [Traffic Management Plan](#) (format available on the Traffic Management for Work on Roadways website).

**THE FOLLOWING CONDITIONS APPLY TO ALL LANE CLOSURE APPROVALS:**

- a) A copy of this form must be kept on hand at the work site and made available upon request by Ministry personnel.
- b) Traffic control devices must be removed during periods of inclement weather or when snow clearing is required.
- c) Traffic control during a holiday period is prohibited unless prior approval is obtained from the Ministry.
- d) This approval is granted subject to traffic queues being monitored continuously by the Ministry or Project Representative while lane closures or traffic diversions are under way. Delays are not to exceed                      minutes over the normal travel time.
- e) The Ministry representative indicated at the top of this form must be informed immediately regarding any schedule changes.

## APPROVAL SECTION

Request denied	Request approved as submitted	Request approved with the following changes:
_____	_____	_____
_____	_____	_____

**The Transportation Management Centre BC (TMCBC) 1-866-707-7862 must be contacted at the installation and removal of the lane closure. This approval must be kept on-hand at the work site.**

District Manager Transportation (or Designate) \_\_\_\_\_ Date \_\_\_\_\_

Once approved, if you have a DriveBC account, you can enter this data directly into DriveBC through the DriveBC Input Tool (DIT). Otherwise, please submit prior to 6:30 a.m. or 24 hours in advance to: [Ministry of Transportation and Transit District Office](#), and cc the Transportation Management Centre BC (TMCBC) at [TMCBC@gov.bc.ca](mailto:TMCBC@gov.bc.ca).