

GD-CS-008B – Portable Traffic Signal Authorisation

This request must be completed and submitted with relevant Temporary Traffic Management documentation.

LOCATION			
Road Name			
	FROM KM:		TO KM:
Location Description			
Type of Work			
DURATION			
Start Date		Finish Date	
Choose one:	Including Weekends	Excluding weekends	
PORTABLE SIGNAL TYPE (Select 1 only)			
Fully Automatic	With Infrared or microwave vehicle detection	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fixed Time	Controlled by a set time cycling accordingly	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Manual	Physically controlled by a person 24 hours	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Travel distance between signals:			
Portable Traffic Management System:		Programming Details:	All Red time (seconds)
Make:			Yellow time (seconds)
Model:			Max Green Time (seconds)
REQUESTING ORGANISATION			
Company Name			
Contact Person		Phone Number	
Associated Project No/Name:			
DLI AUTHORISATION (office use only)			
Name		Signature	
Position		Date	
DLI approving officer to forward authorised document to NT police			
COMMENTS			