TEMPORARY TRAFFIC CONTROL (TTC) REQUEST FORM

APPLICANT CONTACT INFORMATION:

COMPANY/DEPARTMENT: _____

CONTACT NAME: _____ PHONE NO: _____

E-MAIL ADDRESS: _____

ADDRESS: _____

PROJECT INFORMATION:

LOCATION: _____

START DATE: _____ END DATE: _____

FROM: _____ AM/PM TO: _____ AM/PM DEPARTMENT: _____

CREW SUPERVISOR: _____ CELL PHONE NO.: _____

EXCAVATION REQUIRED: YES ☐ NO ☐ REASON: _____

OTHER INFORMATION/REQUESTS: _____

TTC DRAWING ATTACHED: YES ☐ NO ☐ SUBMISSION DATE: _____ SUBMITTED BY: _____

COMMENTS:

FOR MUNICIPAL WORKS USE: **ADDITIONAL NOTICATIONS REQUIRED BY APPLICANT FOR WORK TO BE COMPLETED**

ENVIRONMENTAL UTILITIES ☐ CITY GAS ☐ EMERGENCY SERVICES ☐ CITY TRANSIT ☐

CITY ELECTRIC ☐ R.C.M.P ☐ ALBERTA TRANSPORTATION AND INFRASTRUCTURE ☐ OTHER ☐

BUSINESS/RESIDENTAL NOTIFICATION ☐ PUBLIC ADVISORY ☐

TEMPORARY TRAFFIC CONTROL REQUIREMENT CLAUSES:

1. Temporary Traffic Control Requests shall be submitted **4 Business Days** in advance of the expected start date, as per the City of Medicine Hat Temporary Traffic Control Manual 2008, Section 3.2.2.

2. **FLAG PERSON PERSONAL APPAREL:**
   a. It is required that all persons involved shall wear high-visibility apparel in accordance with Canadian Standard Association, CSA Standard, Z96-02, titled High Visibility Apparel. This will include highly visible/fluorescent head gear, and a clean safety vest meeting CSA Standard Z96-02.
   b. If working in intersections, high speed, or congested areas all persons involved shall wear full flag person apparel including CSA Standard Z96-02 Class Level 2 Coveralls.

3. **EXPOSED SURFACES & SHARP SHOULDERS**
   a. Any hazards that may impact motorists during construction (exposed catch basins, manholes, curbs, uneven surfaces, etc.) shall be marked and signed (eg. Sharp Shoulder, Bump sign, etc.). Traffic Accommodations can be adjusted to address any additional hazards. Contact Municipal Works to revise existing traffic accommodations if needed.

SUBMIT FORM AND TTC DRAWING TO:

MAIL:
MUNICIPAL WORKS DEPARTMENT
188 KIPLING STREET SE
MEDICINE HAT, AB T1A 1Y3

PHONE: (403)529-8177
FAX: (403)502-8040

E-MAIL: TrafficAccom@medicinehat.ca

FOR OFFICE USE ONLY

REVIEWED BY:

DATE REVIEWED:

REVIEWED BY:

DATE REVIEWED:

APPROVED BY:

DWIGHT BROWN, P.ENG., GENERAL MANAGER, MUNICIPAL WORKS

DATE APPROVED: