# **Temporary Traffic Control (TTC) Request Form**



APPLICANT INFORMATION: (Required)  Name  Business Name  Mailing Address
Business Name Mailing Address
Mailing Address
)
City Province
City, Province
Postal Code
Office Phone
Cell Phone
E-mail Submission Date
PROJECT INFORMATION: (Required)  Project Location:
Scope of Work:
Project Start Date:
Project End Date:
Project Hours:
From: To:
Is Excavation Required?
Yes: No:
Site Supervisor (Who's on Site):
Name:
Cell No:
City Department Working For:
CILV DEDALLINEIL WOLKING FOL.
ony Department Working For.
City Department Working For:  City Department Project Manager:  Name:
City Department Project Manager:  Name:
City Department Project Manager:

PROJECT CHECK LIST: (Required)					
	Vaa	No			
TTC Drawing Attached? - Standard Drawing/ Custom Drawing	Yes	No			
Location Map Attached?	Yes	No			
Is Ground Disturbance Required?	Yes	No			
If Yes, locates must be completed or ordered before work starts					
Is This TTC in support of a private development project?  If yes, ensure that all development permits are in place to start work. Contact Planning & Development	Yes	No			
Services for more information on required permits  Is this work for a Telecommunications	Vaa	Na			
project?  If yes, attach City approval letter for line assignments	Yes	No			
Are Sidewalk Closures Required?	Yes	No			
If Yes, show on map how pedestrians will be re-routed	res	INO			
Will Road Closure Impact Parking?	Yes	No			
Do No Parking Signs need to be setup? If Yes, No Parking signs need to be setup 24 hours prior to work starting	Yes	No			
Are Restricted Parking Stalls Required for Contractor Use? (2 hour, 30 min. parking) If Yes, contact the Municipal Works Dept. for Parking Stall Rental Request Form	Yes	No			
Are Back Laneway Closures Required? If Yes, notify Environmental Utilities – Solid Waste Collection	Yes	No			
Are Message Boards Required? If Yes, show on map/drawing of location(s)	Yes	No			
ADDITIONAL NOTIFICATIONS REQUIRED BY O	ONTRA	CTOR:			
(MW to complete. Contractor to make notifications once	TTC is app	proved)			
Environmental Utilities					
EU – Solid Waste Collection					
Electric Distribution					
Gas Distribution					
Parks & Recreation					
Medicine Hat Transit Services					
Emergency Services (Fire Services, Police Services)					
Alberta Transportation					
RCMP					
Business/ Resident Notification					
Public Advisory					
Other					

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ADDITIONAL PROJECT INFORMATION:	
MUNICIPAL WORKS COMMENTS (Dept. Use Only):	

#### TEMPORARY TRAFFIC CONTROL REQUIREMENT CLAUSES:

- 1. a. Temporary Traffic Control Requests shall be submitted a **MINIMUM** of **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
  - b. Incomplete forms will be rejected and re-submittal with proper information will be required

#### 2. FLAG PERSON APPAREL:

- a. It is required that all persons shall wear high visibility apparel in accordance with Canadian Standard Association, CSA Standard, Z96-02, titled High Visibility Apparel. This will include visible/ fluorescent head gear, and clean safety vest meeting CSA Standard 796-02
- b. If working 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 signs, etc.). Traffic Accommodations can be adjusted to address additional hazards. Contact the Municipal Works Department to revise existing traffic accommodations if needed

#### 4. PROJECT END DATE EXTENSION

a. If it is anticipated that the project will extend past the specified end date, notify the Municipal Works Department as soon as possible to extend the duration of the project and to provide a new end date

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	SUBMIT	<b>FORM</b>	AND TTC	DRAWING(	S) TO
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EMAIL: TrafficAccom@medicinehat.ca

**PHONE**: (403)529-8177

MAIL:

MUNICIPAL WORKS 188 KIPLING STREET SE MEDICINE HAT, AB

T1B 1W1

CITY DEPARTMENTS CONTACT INFORMATION		
Fire Services	(403)529-8282	
	fireprevention@medicinhat.ca	
Police Services	(403)529-8481	
	mhps@mhps.ca	
Medicine Hat Transit	(403)529-8214	
	mhtransit@medicinehat.ca	
Environmental Utilities	(403)529-8176	
	eu@medicinehat.ca	
Gas Distribution	(403)529-8190	
	gascustomerservice@medicinehat.ca	
Electric Distribution	(403)529-8286	
	elecdist@medicinehat.ca	
Parks & Recreation	(403)529-8333	
	parks@medicinehat.ca	
Planning &	(403)529-8374	
Development	pbe@medicinehat.ca	

REVIEWED BY:	
DATE REVIEWED:	
REVIEWED BY:	
DATE REVIEWED:	
APPROVED BY:	
STAN NOWAKOWSKI, DIRECTOR – MUNICIPAL WORKS  DATE APPROVED:	

MUNICIPAL WORKS DEPARTMENT USE ONLY