

Traffic Management Plan Form

Traffic Management Reference	For Office Use Only		
Organisation	Contractor	Client	
Contract Name / number (if applicable)			
Location	Road Name (s)	Speed limit	
Description of Activity			
Work Programme			
Proposed/restricted work hours			
Proposed Traffic Management Method	Active		
	Unattended		
	Night		

Proposed Speed Restrictions		
Positive Traffic Management Measures		
Contingency Plans		
Public Notification		
On-site Monitoring		
Other Information		
Layout Diagrams	(Refer to Traffic Management Diagram Selector and insert TMC number if appropriate, or attach diagram.)	
Traffic Controllers (Include copy of Training Certificate or Warrant)	Name (STMS)	Phone (24 hrs)
	Name (TC)	Phone
Prepared By	Contractor	Date
	Engineer	Date

THIS TRAFFIC MANAGEMENT PLAN SHALL BE KEPT ON SITE FOR THE DURATION OF THE WORKS/ EVENT