

APPLICATION FOR A TEMPORARY STREET CLOSURE

& THE ERECTION OF A TENT (if applicable)
2023 / 2024

(Please note that <u>all</u> the affected reside disinclined to approve the application	nts must sign the on, as the streets	form are t	n on Pg. 2, otherwise the M There for use by all resident	funicipality might be ts at all times.).
			(Org	ganization / Family)
REQUESTS THE MUNIC	IPALITY FOR	THE	TEMPORARY CLOSUR	RE OF:
	(street)	in		(town)
between	(number or stre	et) ar	nd	(number or street)
from	(date)	to		(date)
from	(time)	to		(time)
FOR THE FOLLOWING RE	EASON: (E.g. a	socia	al event or a TENT for a	funeral)
We ask the Municipality to deliver the cout ourselves and keep it safe for re-containing fee is payable for the temporary amounts payable are:	CITHE BOX BE close the street of drums to my home collection on the new prary closure of a	LOW on you ne add ext w	, where applicable or behalf, which will incur ender be dress as stated below. We orking day. We know that orking day.	shall roll the drums
MONDAYS - FRIDAYS (08h00 - 16h30)		(afte	AFTER HOURS er 16h30 & on weekends)	
R 366.00 per street bei	ing closed R		00 per street being close	d
We also wish to erect a TENT in the structure the road. We take note that the Municitate the street.	reet and undertal pality will fine us	ke not if we	t to put any tent pens into t put tent pegs in the tarred	the tarred surface of road, as this damages
We have spoken to all the affected residents Attached on page			y objections to the propose tures in this regard.	ed temporary closure.
MY NAME & ADDRESS:				
SIGNATURE:				
DATE:				
CELLPHONE:				

E-MAIL:	
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Signature list of Neighbours

I, the undersigned, declared that I have no objection to the temporary closure of the street (s) as listed on Pa. 1.

Name + Surname	Street + Number	<u>Signature</u>

PLEASE SEND YOUR COMPLETED FORM IMMEDIATELY TO:

Ms Sammy Jansen Fax

Langeberg Municipality <u>Email</u> admin@langeberg.gov.za

Private Bag X2 Tel

ASHTON 6715

023 - 615 8000 (Switchboard)

023 - 615 1563