ENFIELD COUNCIL

Application for a Vehicle Crossover

Please read the guidance notes before completing this form. Answer all questions clearly in BLOCK CAPITALS to help us process your application as quickly as possible.

1 NAME AND ADDRESS OF APPLICANT/AGENT to whom all correspondence will be sent

Title __________________ Name __________________________________________________________________ (Mr, Mrs, Miss, Ms, Dr, etc.)

Address __________________________________________________________________________________________

___________________________________________________ Postcode _____________________________________

Email address _______________________________________ Contact tel. no. ________________________________

a) Are you the owner of the property/land the vehicle will be parked on? (If not, we require written consent from the owner of the property/land before we can process the application. We will confirm the written consent with the land owner. This consent is also required if you are a Council tenant.)

Written consent required and provided? Yes ☐ No ☐

b) If planning permission has been granted for a vehicle crossover, please provide the planning reference no. __________________________________________

2 LOCATION OF THE PROPOSED CUTOVER Address including postcode (if different from above)

___________________________________________________________________________________________

3 WIDTH AND TYPE OF CROSSOVER REQUESTED (please tick appropriate box)

First crossover (ie. there are no other crossovers already constructed which serve this property)

☐ crossover for one parking space (normally 2.4 metres)

☐ crossover for two parking spaces side by side (normally 4.8 metres)

☐ other width _________ metres (between 2.4 metres and maximum 4.8 metres)

Additional crossover (please ensure you meet the criteria stated in the guidance notes)

☐ width required ____________ metres (maximum 3.0 metres)

Extending an existing crossover

Width of extension required ________ metres (providing a crossover up to maximum 4.8 metres for a first crossover or up to maximum 3.0 metres for a second crossover).

Please note where an access is shared by adjoining properties, the total continuous crossover width must not exceed 9.6 metres (4.8 metres per property).
4 ADDITIONAL INFORMATION

Please answer all questions by ticking the correct box so we can check whether planning permission is required.

a) Is the property:
- □ house/bungalow
- □ maisonette
- □ flat
- □ industrial/commercial
- □ Council-owned
- □ former Council-owned
- □ housing association
- □ owner-occupied
- □ rented

b) Is the property:
- □ Council-owned
- □ former Council-owned
- □ housing association
- □ owner-occupied
- □ rented

c) Will you need to build a parking area?       Yes □        No □

If not, was your parking area built within the last four years?     Yes □        No □

d) Do you intend to erect a wall or fence more than one metre high next to the public highway?  Yes □        No □

e) Will vehicles be crossing a grassed area or land which you do not control (apart from normal pavement /verge)?       Yes □        No □

If yes, please give details ______________________________________________________________________

g) Will you need to remove or carry out works to any trees on the property?  Yes □        No □

h) Are you aware of any restrictions/covenants which affect the property, eg:
   • a tree is protected by a Tree Preservation Order (TPO)
   • the property is a listed building
   • relevant permitted development rights have been removed
   • the property is within a conservation area  Yes □        No □

If yes, please specify __________________________________________________________________________

5 DRAINAGE AND SURFACING

a) How will you prevent surface water from draining onto the highway? (Please refer to the guidance notes.) ____________________________________________________________

b) How is the parking area surfaced, or how will it be surfaced?
- □ Permeable (porous) surfacing eg. grass cellular paving
- □ Gravel with a stone size greater than 20mm (loose gravel /pea shingle less than 20mm in diameter is not acceptable)
- □ Asphalt/tarmac
- □ Paving slabs/blocks
- □ Other (please specify) ____________________________________________________________
Please show clearly below the existing or proposed parking area with approximate dimensions using metric measurements, and the location of the proposed crossover. Please refer to the guidance notes for an explanation of what to include. A sample diagram is given to help you.
Checklist

Please make sure you have entered/checked the following before submitting your application:

1. **HAVE YOU READ THE GUIDANCE NOTES?**

2. **THE NAME AND ADDRESS OF THE APPLICANT / AGENT**

3. **THE LOCATION OF THE PROPOSED CROSSOVER**

4. **THE WIDTH OF CROSSOVER REQUESTED**

5. **ANY ADDITIONAL INFORMATION**

6. **DRAINAGE AND SURFACING**

7. **THE SKETCH OR PLAN**

8. **ENCLOSED A COPY OF THE BLUE BADGE IF APPLICABLE (SEE ‘EXEMPTIONS’)**

9. **ENCLOSED THE APPLICATION FEE OR INCLUDED A PAYMENT REFERENCE NUMBER**

10. **DETACHED THE GUIDANCE NOTES AND KEPT FOR REFERENCE**
Declaration

I hereby request Enfield Council, the highway authority, to approve with or without modifications the proposed crossover and, if approved, provide me with a quotation for the cost of the works as proposed by the Council.

I understand that during the assessment of the application it may be necessary for a Council Officer(s) to come onto the property and I confirm I have no objections to this, or I have obtained the necessary consent from the owner. (All members of staff are required to carry Council-issued identification cards.)

I agree that any vehicle parked on the property will not overhang the pavement.

I agree that no vehicle will be driven over the pavement until the crossover has been constructed.

I agree that no vehicle will be driven over the un-strengthened pavement to gain access to the property.

I understand that the authority has the right to refuse an application.

I understand that the authority will use this information to process my application and may share it with third parties in order to complete the process. I have read and understood the data protection information in the guidance notes provided.

Signature _______________________________________________________________ Applicant/Agent (please circle)

Date ___________________________________________________________________

Please now ensure:

1. you have answered all parts of this form. If incomplete, your application may have to be returned or remain unprocessed until the required information is received

2. you detach the guidance notes and retain for your reference

3. you have attached your payment or inserted your payment reference no. here ________________________

4. you send the completed form to the address below.

Please return this form by email to crossovers@enfield.gov.uk

Or by post to:

The Crossover Helpdesk
Highway Services
Place Department
B Block North, Civic Centre
Silver Street, Enfield
EN1 3XD