TRAFFIC MANAGEMENT PLAN (TMP) – SHORT FORM

Complete **short form** if simple activity and RCA permits. Refer to the NZ Transport Agency's Traffic control devices manual, part 8 Code of practice for temporary traffic management (CoPTTM), section E, appendix A for a guide on how to complete each field.

	TMP reference:				Principal (Client): State the name of the principal or client for this project (eg NZTA or Chorus).							
Organisations/ TMP reference	Add the RCA's and contractor's reference numbers.	d contractor's erence				RCA: State the name of the RCA who controls the road that the worksite will be on. Note: There can be more than one RCA.						
	R	load names an	d suburb)		e no. / RP m and to)		Permanent speed	AADT/Peak flows			
Location details and road characteristics	Include the road name/s and any affected intersections, also include the suburb.				Enter hous route positi pole numbu applicable.			Enter highest permanent limit.	Include AADT and/or peak hour and heavy vehicle counts where avail-able. The RCA or engineer must provide this information if available.			
	As above.				As above.		As above.	As above.	As above.			
	As above.				As above.		As above.	As above.	As above.			
Description of work activity	affect the road. 1	the main work act These effects will							ne activity will			
Planned work pro	Enter ear activity m		Time	Enter earliest time activity may start.	End date	activity allowin	latest date / may finish ng for seen issues.	Time	Enter latest time activity may finish allowing for unforeseen			
Consider signific stages, for examp • road closures • detours • no activity periods.	ole:	details of any sig	nificant s	stages.					issues.			
Alternative dates activity delayed Road aspects aff	; if	r activities, iden	5 5				'ed if the work	is delayed.				
Pedestrians affect			_	affected?			affic lanes aff	factod2	Vec Ne			
T EUESUIDIIS DIIEC	160: 162		alless									
Cyclists affected				ng affected?			elays or queu		Yes No Yes No			

Add the appropriate RCA consent reference, for example the corridor access request (CAR) or work access permit (WAP) and/or any RCA contract reference.

TSL/ Diagram (see TSL decision matrix for guidance)		TSL details as required pproval of Temporary Speed Limits (TSL) are in rms of Section 5 of Land Transport Rule: Setting of Speed Limits 2003,Rule 54001 (List speed, length and location)			Times (From and to)		Dates art and finish)	(Layout dra	Diagram ref. no.s (Layout drawings or TMDs)	
Attended day/ night	travelli betwee (House If a TSL speed (i the loca Lane). Add add Note: M the TSL record o same in For lega informati	Use no./RP) on (street or road name) SL is appropriate, add the TSL details - temporary d (eg 70km/h), approximate length (eg 200m) and ocation (eg RP 01N-0260/0.50 or 23-53 Chews		Include the hours that the activity will take place. Note: Activity hours may be restricted by the RCA or contract documents.		Add the date or date range for this activity.		 List the reference for either: the site specific layout drawing(s) that are attached to the TMP (eg layout drawing 1, 2), or the appropriate traffic management diagrams from the field_TTM handbook, if worksite is on a level LV or level 1 road where the RCA has approved the use of generic traffic management diagrams. 		
Unattended day/ night	U		As above.		As ab	ove.	As above.			
Contingency		-		1		_				
If long queues 5mins (or any RCA), site to b additional lane	<i>other peri</i> e disesta	<i>iod required by</i> blished or	Adjust TMD to suit ur circumstances (eg we overlaps with another	eather or s		а	mergency ser ccommodated arough the site	and access prov	vided	
	some cor		worksites. Strike out any this field.	contingenci	ies that are	not ap	plicable to the v	vorksite.		
Contact detail	s									
			Name		24/7 cor numb		CoPTTM ID	Qualification	Expiry date	
Principal	Principal Organisation named		l on permit.	24/7 cont number		tact	Optional.	Optional.	Optional.	
TMC Name				24/7 contact number		Optional.	Optional.	Optional.		
Engineers' representativeIndependent person employ responsibilities include TTN			r whose	vhose 24/7 contact number		Optional.	Optional.	Optional.		
Contractor State the name of the contract		ne contractor.		24/7 contact number		Optional.	Optional.	Optional.		
STMS		Name			24/7 cont number	'act	CoPTTM ID number.	Level of qualification.	Date of expiry.	

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Add the appropriate RCA consent reference, for example the corridor access request (CAR) or work access permit (WAP) and/or any RCA contract reference.

тс		Name			24/7 contact number	CoPTTM ID number.	Level of qualification.	Date of expiry.
Others as required		Name			24/7 contact number	Optional.	Optional.	Optional.
		pproval if STMS delegated authorit		e TM	IPs)			•
<u>Delete the option that</u>	at do	pes not apply (either prepared or app	<u>provea)</u>	1				
Prepared / Approve	<u>ed</u>	Name of the STMS who prepared/approved the TMP. If STMS has been delegated authority to approve TMPs, it may not need to be submitted to the RCA.	<u>Date</u> <u>actioned.</u>	<u>STN</u>	<u>AS signature.</u>	<u>CoPTTM ID</u> <u>number.</u>	Level of qualification	<u>Date of</u> <u>expiry.</u>
		<u>Name</u>	<u>Date</u>	<u>Signature</u>		<u>ID no.</u>	<u>Qualification</u>	<u>Expiry date</u>
This TMP meets Co	DPT	TM requirements		Nu	mber of diagrar	ns attached		
<u>TMP returned for</u> correction			<u>Date</u> <u>actioned.</u>	<u>S</u>	<u>TMS signature.</u>	<u>CoPTTM ID</u> <u>number.</u>	<u>Level of</u> <u>qualification</u>	<u>Date of</u> <u>expiry.</u>
COTECTION	Name		<u>Date</u>	<u>Signature</u>		<u>ID no.</u>	Qualification	Expiry date
Engineer/TMC to co	omp	lete following section when appro	oval or acce	ptano	<u>ce required</u>			
Approved by TMC or engineer			<u>Date</u> <u>actioned.</u>	<u>S</u>	<u>TMS signature.</u>	<u>CoPTTM ID</u> <u>number.</u>	<u>Level of</u> <u>qualification</u>	<u>Date of</u> <u>expiry.</u>
(delete one)	<u>Na</u>	<u>me</u>	<u>Date</u>		<u>Signature</u>	<u>ID no.</u>	<u>Qualification</u>	Expiry date
Acceptance by TMC (if required)			<u>Date</u> <u>actioned.</u>	<u>S</u>	<u>TMS signature.</u>	<u>CoPTTM ID</u> <u>number.</u>	<u>Level of</u> <u>qualification</u>	<u>Date of expiry.</u>
<u>TIME (II Tequireu)</u>	<u>Na</u>	<u>me</u>	<u>Date</u>		<u>Signature</u>	<u>ID no.</u>	Qualification	Expiry date
Qualifier for engine	eer o	or TMC approval						
 <u>Approval of this TMP authorises the use of any regulatory signs included in the TMP or attached traffic management diagrams.</u> <u>This TMP is approved on the following basis:</u> <u>1. To the best of the approving engineer's/TMC's judgment this TMP conforms to the requirements of CoPTTM.</u> <u>2. This plan is approved on the basis that the activity, the location and the road environment have been correctly represented by the applicant. Any inaccuracy in the portrayal of this information is the responsibility of the applicant.</u> <u>3. The STMS for the activity is reminded that it is the STMS's duty to postpone, cancel or modify operations due to the adverse traffic, weather or other conditions that affect the safety of this site.</u> 								
TMP preparation (or approval if STMS delegated authority to approve TMPs)								
Delete the option that does not apply (either prepared or approved)								
Prepared / Approved This TMP meets CoPTTM requirements		Name of the STMS who prepared/appro If STMS has been delegated authority to TMPs, it may not need to be submitted t) approve	<u>sta</u>	4 S signature.	<u>Date</u> actioned.	<u>Level of</u> qualification.	<u>CoPTTM-ID</u> <u>number.</u>
		Name			Signature	Date	Qualification	ID no.

This TMP meets Co	oPTTM requirements	_Number of diagrams attached						
TMP returned for correction	Name of TMC or engineer returning TMP	<u>TMC or engineer</u> <u>signature</u>	<u>Date</u> actioned.	<u>Level of</u> qualification.	CoPTTM ID number.			
concenton	Name	-Signature	Date	Qualification	ID no.			
Engineer/TMC to co	Engineer/TMC to complete following section when approval or acceptance required							
Approved by TMC or engineer (delete one)	Name of the TMC or engineer who approved the TMP.	<u>-TMC or engineer</u> <u>signature.</u>	Date actioned.	<u>Level of</u> qualification.	<u>CoPTTM-ID</u> <u>number.</u>			
	Name	Signature	Date	Qualification	ID no.			

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Acceptance by TMC	Name of the TMC.	TMC signature.	<u>Date</u> actioned.	<u>Level of</u> qualification.	<u>CoPTTMID</u> number.			
(if required)	Name	Signature	Date 0	Qualification	ID no.			
Qualifier for engineer or TMC approval								
Approval of this TMP authorises the use of any regulatory signs included in the TMP or attached traffic management diagrams. This TMP is approved on the following basis:								
1. To the best of the approving engineer's/TMC's judgment this TMP conforms to the requirements of CoPTTM.								
2. This plan is approved on the basis that the activity, the location and the road environment have been correctly represented by the applicant. Any inaccuracy in the portrayal of this information is the responsibility of the applicant.								

3. The STMS for the activity is reminded that it is the STMS's duty to postpone, cancel or modify operations due to the adverse traffic, weather or other conditions that affect the safety of this site.