

Transport Management Plan Coversheet Oversize and/or Overmass (OSOM)

Use this form if your OSOM movement is classified as 'High Risk', or on a 'High Risk' route or your load is classified as a 'Critical/ Sensitive' load. Definition of 'High Risk' or 'Critical/Sensitive' load is available at https://www.transport.nsw.gov.au/operations/roadsand-waterways/business-and-industry/heavy-vehicles.

Please complete Part A of this form, address Parts B to F (that are relevant to your OSOM movement) in your Transport Management Plan (TMP) and sign the declaration in Part G.

Giving false and misleading information is a serious offence

| Pa | rt A - Operator and Route Information | 3. | Laden combination detail | |
|----|--|----|--|------------------------------|
| ۱. | Transport operator details Business name | | Width (in 2 decimal places) m | Length (in 2 decimal places |
| | | | Height (in 2 decimal places) | Mass (in 2 decimal places) |
| | | | . m | . t |
| | Business address | | Load description (make & mod | del if machinery) |
| | Postcode | | | |
| | ABN | | | |
| 2. | Contact person details Name | 4. | Route details Load pick-up address or borde | er crossing if interstate |
| | | | | Postcode |
| | Phone Fax | | Load destination address or be | order crossing if interstate |
| | Email | | | |
| | | | | Postcode |
| | | | Proposed route | |
| | | | | |
| | | | | |

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Contact Details

Monday to Friday 8.30am to 4.30pm AEST (excluding Public Holidays) Transport for NSW PO Box 94 Glen Innes NSW 2370 T 1300 656 371

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For TfNSW to accurately assess this request, please include Part A - Operator and Route Information continued the following information in your TMP (tick applicable) 5. Emergency contact person details Part B - Vehicle/Combination and Load details Consignor Side and rear elevation drawings and/or photographs Name showing the full dimensions (width, length, height, rear projection, mass) of the load and the vehicle/ combination transporting the load. For overmass combination - the drawings and/or Work phone Mobile phone photograph must also show individual axle spacing's, ground contact axle width and the required axle group mass, registration numbers and details of combination to be used (e.g. 2 x 8 low loader dolly + 4 x 8 low loader **On-site contact** or 6 x 8 gooseneck platform or 10 x 8 drawbar platform). Name Details of the load type and number of loads. Additional equipment and/or parts included or removed for transportation (if applicable). Work phone Mobile phone Part C - Route Survey of Proposed or 'High Risk' Route(s) Escort vehicle company contact (if applicable) A route survey is a documented report on your proposed or Name 'High Risk' route that identifies: Obstacles and 'pinch points' on the proposed and/or 'High Risk' route and the plans to safely navigate through them. Measured dimensional restrictions at intersections, Work phone Mobile phone bridges, crossings, underpasses and overhead structures (including vegetation). Current roadworks. 6. Transport Management Plan (tick applicable) Road carriageway widths. Your TMP addressing the relevant Parts B to F provided on the following pages must be submitted with this application. Proposed movement or relocation of road furniture such 'High Risk' movements - TMP for OSOM movement as signs and lights (including details of individual/ that is classified as 'High Risk' due to dimensions or organisation who will be moving or relocating the road weights must address Parts B to F. furniture). Any other activity that may be affected by the passage 'High Risk' route - TMP for OSOM movement that is of this movement (e.g. bus services etc). classified as 'High Risk' due to travel on a 'High Risk' route only must address Parts B to F however Part C Suitable rest stops where the vehicle/combination can and Part D only need to address the 'High Risk' route. stop off the road. 'Critical/Sensitive' loads - TMP for OSOM movement Pull over locations where the vehicle/combination can that is not classified as 'High Risk' but is carrying pull over to allow any following and/or oncoming traffic 'Critical/Sensitive' load must address Part B, Part E to F to safely pass. and relevant section of Part D. continued page 3 TMP provided (mandatory)

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| art D - Traffic Management Arrangements | Part G - Applicant Declaration | | |
|--|--|--|--|
| 'High Risk' movement and route must address all this section including those relevant to 'critical/sensitive' loads: The protocol that will be used for activating pull over's along the proposed route for movements classified as 'High Risk' and/or 'High Risk' routes and the length of time between pull over's. The proposed method of allowing following and / or oncoming traffic to pass. The protocol for managing following and/or oncoming traffic at the identified "pinch points". The speed of the movement along the proposed and/or 'High Risk' route. A diagram of the movement showing the positions and roles of all parties including Police (if applicable) | The information given in this application is complete, true and correct in every detail. I understand that failure to provide complete, true an correct information in this application may result in the application being not processed or refused. I understand that Personal Information about me is collected and held by Transport for NSW, of 20-44 Ennis Road Milsons Point NSW 2061. I understand that my personal information is being collected for the purpose of deciding whether to issue a permit to me. I acknowledge that this information is provided for the purpose of the Road Transport (Vehicle and Drive Management) Act 2005. I understand that if I do not supply the requested details and/or do not sign/confirm this declaration a permit may not be issued to me. | | |
| involved in the movement and distances between them. 'Critical/Sensitive' load that are not also 'High Risk' must address the following: The proposed date and time of the movement or a schedule of movements where there are multiple | I acknowledge that personal information about me had TfNSW may be disclosed inside and outside NSW to licensing and vehicle registration agencies, law enforce agencies, providers of compulsory third party (bodily insurance and solicitors in regard to motor accidents. I acknowledge that personal information | | |
| movements planned. Contingency arrangements in the event of an emergency, breakdown or incident. Contact names and numbers of those involved in the movement (e.g. drivers, pilots etc). | me held by TfNSW may be disclosed for the purposes of verifying the contents of this application; the administration of driver licensing and vehicle registration legislation and law enforcement; and for the purposes of the protection of public revenue and road safety. I understand that I have a right to access and where necessary seek amendment of personal information about | | |
| art E - Stakeholder and Community Consultations | me held by TfNSW in accordance with the provisions of the Privacy and Personal Information Protection Act 1996 | | |
| Relevant approvals from infrastructure authorities. | (NSW) and/or the <i>Privacy Act 1988</i> (Cth). | | |
| Evidence of contact and/or approvals from Local Councils along the proposed route. | Transport operator or contact person name (print) | | |
| Proposed plans to mitigate disruption to other road users and activities affected by the passage of this load (e.g. advertising, use of Variable Message Signs etc). | Position in company | | |
| art F - Rail Infrastructure Manager (RIM) approval | | | |
| If your proposed route for your OSOM movement travels over any railway crossing you must provide: A RIM approval from the relevant RIM(s) for each railway crossing on your proposed OSOM route. For more information, please visit: https://www.transport.nsw.gov.au/operations/roads-and-waterways/business-and-industry/heavy-vehicles Please note a railway crossing is defined as where a | Transport operator or contact person signature Date day / month / year | | |
| road and railway cross at the same grade i.e. a level crossing. | Part H - Lodging your form | | |
| | Cubmit this completed term and all required decompatation | | |

Submit this completed form and **all** required documentation by email, fax or mail:

Email to: spu@transport.nsw.gov.au

Fax to: 1300 361 570

Mail to: Transport for NSW

PO Box 94

Glen Innes NSW 2370