**Temporary Traffic Management (TTM)**

**Advisory Note**

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| **Date of audit** | [Date Month Year] | | **Time** | | 00h00 |
| **Audited by** |  | | **of** | | RCA to go here |
| **Rating** | Unacceptable (SCR and/or Other Checks) | | **CAR number** | | 123456 |
| **Company** |  | | **Principal** | |  |
| STMS/Responsible parties:  **[Name] [Qualification] [ID number]** | | | | | |
| The AT TTM Review Panel has determined that this advisory note be issued as a result of a TTM Site Condition Review (SCR) and the identified temporary traffic management issues at this site.  The objective of this Advisory Note is to reduce if not eliminate the root causes of the unsafe practices identified in the SCR, that is, to find a permanent cure to prevent the problem recurring, not just a ‘quick-fix’. This Advisory Note is intended to trigger a formal and disciplined procedure for identifying, investigating, and correcting the unsafe practices and/or any shortcomings in the company's work practices. | | | | | |
| Roads: **[Name, Suburb]** | | | | | |
| This advisory note is issued in respect to the following unsafe practices identified: | | | | | |
| * STMS nominated in TMP not on worksite | | | | | |
| * TC nominated in TMP and briefed by STMS (level LV and level 1) not on worksite | | | | | |
| * Copy of signed and approved TMP not on worksite | | | | | |
| * Temporary traffic management not in accordance with the CoPTTM * Inappropriate or excessive TSL * Safety audit of temporary traffic management site condition rating ‘Unacceptable’ or ‘Dangerous’ | | | | | |
| The actions required to be implemented are to: | | | | | |
| Identify and investigate the root causes of the non-conforming temporary traffic management identified in the SCR and this NNC to find a permanent cure to prevent the problem recurring.  Implement a Corrective Action Plan to:   * [Detail 1] * [Detail 2] * [Detail 3] * [Detail 4] | | | | | |
| An Advisory Note stands for 5 working days in which time you, as the manager of the responsible party you must outline the corrective steps that will be taken to prevent the problem arising again. For example: investigation, documentation and implementation of a corrective action plan for each of the unsafe practices identified.  A response to this Advisory must be returned within 5 working days detailing the Corrective Action Plan for the unsafe practices identified above. You will be expected to implement the Corrective Action Plan as soon as possible and as agreed. If no response is received this advisory note will be upgraded to a Notice of Non Conformance (NNC) against the responsible parties.  Your response will be considered by the Review Panel to determine the close out of this Advisory Note. All findings will be retained on record for future reference. | | | | | |
| **Note** sent to: | | **[Name] on: [Day Month Year]** | | **Response due by: [Date and Time]** | |
| **Signed:** | | | **Received:** | | |
| **TTM Review Panel** | | | Contractor: **[Name]** | | |