

# PUBLIC RIGHTS OF WAY USER EVIDENCE FORM

(Please answer all questions. Please complete the form in black ink.)

FOR ANY QUERIES REGARDING THE COMPLETION OF THIS FORM, PLEASE CONTACT THE  
COUNTRYSIDE ACCESS SECTION ON 0115 977 4395/ 4961/ 4709

1. FULL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
(BLOCK CAPITALS PLEASE)
2. ADDRESS (BLOCK CAPITALS) \_\_\_\_\_  
\_\_\_\_\_
- 3A Email address \_\_\_\_\_
3. OCCUPATION \_\_\_\_\_ TELEPHONE NO \_\_\_\_\_  
(If retired, please state so and give most recent occupation)
4. How long have you lived in the area? \_\_\_\_\_  
(If less than 5 years, please state where you previously lived)
5. DESCRIPTION OF ROUTE:-  
From: (Road name/ existing public right of way) \_\_\_\_\_  
To: (Road name/ existing public right of way/ public place) \_\_\_\_\_
6. Do you regard this route as public? \_\_\_\_\_
7. How did you come to find out about it? \_\_\_\_\_
8. Have your friends or family regarded it as public? \_\_\_\_\_
9. How many years have you known of the existence of the route? \_\_\_\_\_
10. In what year did you begin using the route? \_\_\_\_\_
11. Do you still use the route? \_\_\_\_\_ If not, in what year did you stop using it, and why? \_\_\_\_\_  
\_\_\_\_\_
12. By what means have you used the route? (Please give approximate dates for each type of use)  
On foot  For how long? \_\_\_\_\_  
On horseback  For how long? \_\_\_\_\_  
On bicycle  For how long? \_\_\_\_\_  
By horse drawn vehicle  For how long? \_\_\_\_\_  
By a motorised vehicle  For how long? \_\_\_\_\_
13. Is the route well defined on the ground? \_\_\_\_\_
14. For what purpose do you use the route? \_\_\_\_\_  
(E.g. pleasure, going to work [specify location] or shops, or other reason - please specify)
15. How frequently have you used the route? \_\_\_\_\_  
(E.g. the number of times per day, week or month etc. - please specify)
16. Were there ever any stiles, gates, fences, signposts or notices along the path? \_\_\_\_\_ If so please state what, where and when, mark their location on the map, and indicate whether it is still there.  
Stiles: \_\_\_\_\_  
Gates: \_\_\_\_\_  
Notices: \_\_\_\_\_  
(Please give wording)  
Signposts: \_\_\_\_\_  
Fences: \_\_\_\_\_

17. Have any works taken place along the route during your use? (E.g. landscape changes, engineering works, road schemes, etc.) If so, please give details of what, when and for how long.

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18. Have you ever been prevented from using the route? \_\_\_\_\_ If so, give details of who or what prevented you and when.

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19. Name of owner(s) or tenant(s) of land, if known. \_\_\_\_\_

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20. Have you ever been employed by, or a tenant of the owner of the land crossed by the claimed route? \_\_\_\_\_ If so, give dates and details of post held, etc. \_\_\_\_\_

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21. Are you related to a tenant or owner of the land crossed by the claimed route? \_\_\_\_\_

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21A. Have you ever been given permission to use the path, if so by whom? \_\_\_\_\_

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22. Have you ever seen anyone else using this route? \_\_\_\_\_  
If so, please indicate when, by what means and how regularly. \_\_\_\_\_

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23. What status do you consider this route to have?

Footpath	<input type="checkbox"/>	Restricted Byway	<input type="checkbox"/>
Bridleway	<input type="checkbox"/>	Byway Open to All Traffic	<input type="checkbox"/>

24. Any further information (Use an additional sheet if necessary)

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I hereby certify that to the best of my knowledge and belief, the facts that I have stated are true.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Miss/ Mrs /Ms /Mr)

Name and address of person taking the statement. (If anyone other than the above signatory) \_\_\_\_\_

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NOTE: Details of your evidence may be disclosed to other interested parties. Should a dispute arise over the existence of the claimed route, it would be helpful if you could present your evidence at a local public inquiry.

Please Return the Completed Form and Plan to the Co-ordinator of the Path Claim or Countryside Access Team (TBH), Nottinghamshire County Council, County Hall, West Bridgford, Nottinghamshire NG2 7QP.