

COMMENCEMENT OF TESTING AND SAMPLING

This form must be emailed to NWL prior to commencement of testing and sampling.

Email: newdevelopmentwater@nwl.co.uk

NWL Ref.	Q
Date sent to NWL	

Self-Lay Provider (SLP)	
Site Contact Name	
Contact Telephone Number	

Site Address			
Location/Section of main and Plot No.'s			
Material		Length (m)	Diameter (mm)

Please note dates provided are used to schedule Northumbrian Water resources, therefore actual dates are required and not proposed dates or week commencing dates.

Please Note: **You must provide a minimum of 5 working days notice.**

Date pressure testing and chlorination will commence (Minimum notice 5 working days)	
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(To be signed by the Competent Person)

Print Name		Signature	
Company		Date	

NWL office use only

Date form received by New Development		Date form passed to Construction Supervisor	
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