

## SELF-LAY MAINS SCHEME COMMISSIONING

This form must be returned with a copy of the as laid drawing to show the relevant section of main.

Email: [newdevelopmentwater@nwl.co.uk](mailto:newdevelopmentwater@nwl.co.uk)

<b>NWL Ref.</b>	Q		
<b>Date sent to NWL</b>			
<b>Self-Lay Provider (SLP)</b>			
<b>Site Contact Name</b>			
<b>Contact Telephone Number</b>			
<b>Site Address</b>			
<b>Location/Section of main and Plot No.'s</b>			
<b>Material</b>		<b>Length (m)</b>	<b>Diameter (mm)</b>

This form must be returned with a copy of the as laid drawing and pressure test certificate before the mains connection can be programmed.

### Test data to be completed by tester of main.

Operation	Date	Operation	Date
<b>Charge Main</b>		<b>Chlorination</b>	
<b>Swabbed</b> (Complete swabbing record overleaf)		<b>De-Chlorination and Flush</b>	
<b>Pressure test</b> (Test certificate to be attached)		<b>Final Sample</b>	

Disinfection	Result
<b>Chlorine concentration - start</b>	mg/l
<b>Chlorine concentration - end</b>	mg/l
<b>Chlorination contact time</b> (Min. 16hrs)	(hours)

<b>Print Name</b>		<b>Signature</b>	
<b>Company</b>		<b>Date</b>	

## SELF-LAY MAINS SCHEME SWABBING RECORD

Please complete the table below

Location from				
Location to				
Installation Method (Please tick)	Drilled	Open Cut	Pipeburst	Slipline
If drilled, lubricant used (Please tick)	Water	Bentonite	Other (state)	
Installed jointing Method (Please tick)	Butt fused coils	Electro fusion joins	Combination of both	

Pipe Length (m)	Pipe material and class/SDR	Pipe size (mm)	Pipe nominal bore (mm)

Swab	Type	Diameter of swab (min)	Water velocity (m/s)	Confirm removal of swab	Clarity (describe)	Debris (describe if discharged)	Witnessed, completed by and date
1							
2							
3							
4							
5							
6							

Date	Swabbed by	Discharge monitored by

I confirm that the length of pipe has been swabbed in accordance with the Disinfection Code of Practice and that after \_\_\_\_\_ passes of a swab, the water in front of the final swab was clear with no particulate material present. The final swab had no ingrained material present nor was it discoloured.

(To be signed by the Competent Person)

<b>Print Name</b>		<b>Signature</b>	
<b>Company</b>		<b>Date</b>	

NWL office use only

<b>Date form received by New Development</b>		<b>Date form passed to Construction Supervisor</b>	
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