

SELF-LAY MAINS SCHEME REQUEST FOR ROUTINE INLINE MAINS CONNECTION

To be returned with supporting documentation as specified in the Self-Lay Code of Practice, (2nd edition) National Addendum for Safe Control of Routine Mains Connections.

If this connection is for a NAV site, please also provide a copy of the Water Services Regulation Authority variation of appointments notice made under s.7(2) and s.7(4)(b) of the Water industry Act 1991.

Email: newdevelopmentwater@nwl.co.uk

| | | | |
|--|---|---------------------------------|--|
| NWL Ref. | Q | Date sent to NWL | |
| Self-Lay Provider (SLP) | | | |
| Originator | | Contact Telephone Number | |
| Site Address | | | |
| Location/ Section of main (Description) | | | |

| | | | | |
|--|-------|-----------------|---------------------|----------------------|
| Description of proposed works: | | | | |
| Please attach Method Statement detailing step by step procedure & techniques | | | | |
| Existing main size (mm) | | Material | | |
| New main size (mm) | | Material | Length (m) | |
| Connection will be too: | | | | (Please tick) |
| 1. newly laid main | | | | |
| 2. a main controlled by a sluice valve/double spade valve | | | | |
| 3. a main which does not supply properties | | | | |
| Method for isolating supply | | | | |
| 1. operate valve | | | | |
| 2. squeeze off | | | | |
| 3. double spade valve | | | | |
| 4. other, please describe | | | | |
| Proposed start | Date: | Time: | Proposed end | Date: Time: |

| | | | |
|---|-------|------------|-----------|
| SLP Senior Competent Person (SCP) Authoriser | Name: | Signature: | EUSR No.: |
| Competent Person (CP) Undertaking Work | Name: | Signature: | EUSR No.: |

SCP comments: (please attach separate sheet if required)

SCP Contact No.

| | | | |
|--|-------|------------|--|
| NWL office only – Is this site a NAV? | Yes: | No: | If yes, check that OFWAT has awarded NAV before Approval |
| NWL Clearance to proceed | Name: | Signature: | Contact No: |

NWL Conditions or specific requirements:

Date Connection Approved:

NWL office use only

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