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|  | **SL-N3B Notification of Proposed Routine Mains Connection** | | | | | | | | | | | |
| This form should be used by SLPs to inform Bristol Water that they intend to make a routine mains connection, i.e inline. It should be submitted, 7 days in advance of the date on which the mains are to be swabbed, pressure tested and chlorinated, to [NetworkSiteAgents@bristolwater.co.uk.](mailto:NetworkSiteAgents@bristolwater.co.uk) | | | | | | | | | | | | |
| **1. Scheme Details** | | | | | | | | | | | | |
| Site Name: |  |  | Developer: | | |  |  |  |  |  |  |  |
|  |  |  |  | | |  |  |  |  |  |  |  |
| SLP: |  |  | Bristol Water Application Number (eg MLA 1234567): | | | | | | | |  |  |
| **2. Swabbing, Pressure Testing, Chlorination & Connection Dates** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| When do you intend to swab the mains? | | | | DD |  | MM |  | | YY |  |  |  |
| When do you intend to pressure test the mains? | | | | DD |  | MM |  | | YY |  |
| When do you intend to chlorinate the mains? | | | | DD |  | MM |  | | YY |  |
| When will the mains be ready for sampling by Bristol Water? | | |  | DD |  | MM |  | | YY |  |
| (A more precise date/time for the connection will be discussed with you once the sample results are known.) | | Estimated connection date | | DD | : hrs | MM |  | | YY |  |  |  |
| Estimated start time | |  |
| **3. Details of the Mains to be Commissioned** | | | | | | | | | | | | |
| How many **end** washouts or end hydrant/washouts are there on the mains that are to be commissioned? | | | | | | | | | | | | |
| **You must attach a plan**, showing the mains on this site, to this form. Please clearly **highlight the mains that are to be commissioned**. Tick to indicate that such a plan is attached. | | | | | | | | | | | | |
| Please indicate the diameters and approximate length of the mains that are to be commissioned. | | | | | | | | | | | | |
|  | | Diameter (mm) | Length (m) | | | | |  | | | | |
| 63 |  | | | | |
| 90 |  | | | | |
| 125 |  | | | | |
| 180 |  | | | | |
| Other (please specify) |  | | | | |
|  | | | | | | | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **4. Competent & Senior Competent Person (CP & SCP)** | | | | |
| **Senior Competent Person** |  |  |  |  |
| SCP Name: |  |  |  | SCP Contact Telephone Number: |
|  |  |  |  |  |
| SCP Comments |  |  |  |  |
|  |  |  |  |  |
| SCP EUSR number: |  |  |  | SCP Signature: |
|  |  |  |  |  |
| **Competent Person** |  |  |  |  |
| CP Name: |  |  |  | CP EUSR number: |
|  |  |  |  |  |
| CP Contact Telephone Number: |  |  |  |  |
| **5. Connection Details** | | | | |
| **The Main Being Connected to (i.e. the existing m** | **ain)** |  |  |  |
| Diameter at the  connection point: |  |  |  | Material: |
| **The Main to be Connected (i.e. the new, self-laid main)** | | | | |
| Diameter at the  connection point: |  |  |  | Material: |
| **Supply Isolation** |  |  |  |  |
| Please tick to indicate how you intend to isolate the supply: | | | | |
| Operate sluice valve |  |  |  | Squeeze off MDPE/HPPE main (non-barrier  pipe only) |
| Operate double spade valve |  |  |  | High-flow top tee (63mm diameter only) |
| Other (please specify): |  |  |  |  |