Verification of Supply Point(s) Request
For Use by Licensed Providers

1. **Licensed Provider Details:**
   - Licensed Provider: ____________________________
   - Licensed Provider's own Reference: ____________________________
   - Licensed Provider ID: ____________________________
   - Contact name: ____________________________
   - Contact number: ____________________________
   - Contact e-mail: ____________________________

2. **Premises Details:**
   - Supply Point ID (SPID): ____________________________
   - Address of premises: ____________________________
     ____________________________
   - Postcode: ____________________________
   - Contact name at premises: ____________________________
   - Contact number: ____________________________

3. **Supply Points to be Verified:**

   3.1 Services to be verified:
   Please indicate all services provided at the premises:

   - Water Connection: □ Roads Drainage: □
   - Sewerage Connection: □ Property Drainage: □
   - Services to Caravans: □ Metered Water: □
   - Troughs and Drinking Bowl Connections: □ Metered Sewerage: □
Outside Taps: □ Other: □

if other, please specify: _______________________________________

Please indicate all services required to be verified:

Water Connection: □ Roads Drainage: □
Sewerage Connection: □ Property Drainage: □
Services to Caravans: □ Metered Water: □
Troughs and Drinking Bowl Connections: □ Metered Sewerage: □
Outside Taps: □ Other: □

if other, please specify: _______________________________________

3.2 Services at metered premises:

For verification of meter details, please provide any meter details that you have on your records:

<table>
<thead>
<tr>
<th></th>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meter type:</td>
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<td>Meter make:</td>
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<td>Meter size:</td>
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<td>Meter serial number:</td>
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<td>Meter pit number:</td>
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<tr>
<td>x,y coordinates:</td>
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</table>

Meter 1 Location:

________________________________________________

________________________________________________

Meter 2 Location:

________________________________________________

________________________________________________

Meter 3 Location:

________________________________________________

________________________________________________
3.3 **Reasons for request:**
Please provide the reason(s) for the request or any information to assist the query (i.e. why services are thought to differ from records held):
________________________________________________________________
________________________________________________________________
________________________________________________________________

4. **Additional Information:**

Please provide any additional information where appropriate:
________________________________________________________________
________________________________________________________________
________________________________________________________________

5. **Consent to Contact Non-Household Customer:**

Scottish Water may wish to contact the Non-Household Customer to arrange a visit to the premises. In such circumstances Scottish Water will inform the Licensed Provider of the arrangements prior to any visit. Please indicate whether you give consent for Scottish Water to contact the Non-Household Customer directly to arrange a visit to the premises?

Yes: ☐
No: ☐

6. **Your Details:**

Signature: ___________________________ Date: ___________________________

Full name (in capitals): ___________________________

Role in the company or job title: ___________________________