Form A

Application to Connect to the Public Water Supply System
For Use by Licensed Providers

This form sets out the information required to request an offer of connection to the Network from Scottish Water for an individual premises Part 1 water connection. The form is divided into sections, as follows:

1) Licensed Provider Details
2) Reason for the Request
3) Premises to be Connected
4) Contractor Details
5) Connection Details
6) Building Water Supply
7) Special Requirements
8) Request for Track Inspection, pressure testing or bacteriological sampling
9) Change/Resubmission of Application Details
10) Confirmation of Completion of Connection
11) Declaration

The relevant sections of the form should be completed and submitted to Scottish Water in the following stages:

1. Application for approval for a connection to the Scottish Water Network – sections 1-7;
2. providing a minimum of 5 Business Days advance notice, a request for Track Inspection, pressure testing or bacteriological sampling – section 8;
3. where applicable, following any change to the details of the application for connection – section 9;
4. only where a connection has been carried out by an Accredited Entity following instruction from the Licensed Provider, Confirmation of Completion of Connection – section 10.

The Licensed Provider must complete a declaration (section 11) at each stage of the application. The form should also be resubmitted where any details previously provided have been updated. Mandatory information will vary depending on the stage of the process and who is undertaking the work.
It should be noted that this is the Operational Code version of the form; it may be presented in alternative formats as appropriate (such as an internet-based format); the content will be as presented here.

1. **Licensed Provider Details:**

   Licensed Provider Name: ______________________________ ID:_________
   Licensed Provider's own Reference: ______________________________
   Contact name: ______________________________
   Contact number: ______________________________
   Contact e-mail: ______________________________

   **Nominated contact for access to Scottish Water's customer portal**

   Licensed Providers may nominate one third-party (non-Licensed Provider) contact who will have access to view the application details through Scottish Water’s customer portal. If such access is required, please provide details below.

   Company name: ______________________________
   Contact name: ______________________________
   Contact number: ______________________________
   Contact e-mail: ______________________________

2. **Reason for the Request**

   Please indicate the reason for the request and complete the relevant section below.

   - [ ] Request for Scottish Water to carry out a connection to the Network. Please complete sections 3-7
   - [ ] Request for approval to carry out a connection to the Network using an Accredited Entity. Please complete sections 3-7
   - [ ] Request for Scottish Water to carry out a Track Inspection, pressure testing or bacteriological sampling. Please provide the previous Scottish Water reference for the connection application _________________

   Please complete section 8.
☐ Change to an application for a connection to the Network. Please provide the previous Scottish Water reference for the connection application __________________. Please complete section 9.

☐ Re-submission of an application for a connection to the Network following a rejected or lapsed application or completion of a DIA. Please provide the previous Scottish Water reference for the connection application __________________. Please complete section 9.

☐ Notice of completion of a connection to the Network. Please provide the previous Scottish Water reference for the connection application __________________. Please complete section 10.

3. Premises to be Connected:

Please indicate the type of premises at which the new connection is required

New build ☐

Existing ☐ Please complete section 3.1 in addition to section 3

What was the previous use of this site:

Greenfield or agriculture ☐

Housing ☐

Industry ☐

Landfill ☐

Other ☐

If other please specify: _______________________________________

Please quote any

Scottish Water DIA reference previously given to your site __________

Address of new premises
Plot/Unit: ______________________________
Building Number: ______________________________
Building Name: ______________________________
Site: ______________________________
Street: ______________________________
Town: ______________________________
Postcode (or area code): ______________________________

Unique property reference number (if available): Please provide the unique property reference number(s) requested below.

SAA Reference Number: ______________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

UPRN: ______________________________

Where the UPRN is not available, please provide a valid supporting reason(s) below:

Property not yet rated
Missing entry from the OSG
Missing entry from the SAA
Fish farms, fishing, and sporting rights
Agricultural land, buildings and troughs
Property is multi-tenancy
Fish farms, fishing, and sporting rights
Infrastructure Project
Parks, Allotments and Sports Ground
Agricultural including troughs
Property is multi-tenancy
Not yet issued by planning
Other (please provide details)

Other (please provide details)

1 Unique property reference number: The SAA Reference Number will only be available after a property has been rated and can be obtained from the SAA website at www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk - or alternative sources as agreed with Scottish Water.
Owner of the premises
Name or company name _____________________________________
Address _____________________________________
_____________________________________
Postcode _____________________________________

Is the premises intended to be multi-tenancy?
Yes ☐
No ☐
Don’t Know ☐
If yes, please provide any additional information, such as number of units and unit addresses.
________________________________________________________________________
________________________________________________________________________

Are there new domestic premises associated with this development
Yes ☐
No ☐

Type of premises (please tick appropriate box)

Hospital ☐ Prison ☐
School ☐ Care Home ☐
Warehouse ☐ Factory ☐
Agriculture ☐ Shop ☐
Holiday Chalets ☐ Hotel ☐
Office ☐ Other ☐
If other, please specify: ____________________________________________
____________________________________________
____________________________________________

Do you require water to be supplied at three storeys or above (or equivalent height)?
Yes ☐
No ☐

Anticipated annual water consumption _________ m³
Planning reference: __________________________
Date: __________________________
Local Authority Area: __________________________

Number of persons to be employed in the development and, where appropriate, the number of residents to be accommodated in the development, e.g., if a hotel:

_________________________________________
_________________________________________

Are there any potential contaminated land issues relating to your site? (please tick appropriate box):

Yes  □
No  □

If yes, please indicate investigation measures adopted:
_________________________________________
_________________________________________
_________________________________________

Additional information in support of the application:
_________________________________________
_________________________________________
_________________________________________
_________________________________________

3.1 New connection at Existing Premises

Supply Point ID: __________________________
Postal address of premises: __________________________
Postcode(s): __________________________
Reason for the new connection:

- Replacement of existing connection (e.g. increase/decrease size)
- New connection required in addition to the existing connection (e.g. extension of premises)
- No connection at the property (e.g. supply disconnected)
- Other

If other please specify:

_______________________________________
_______________________________________
_______________________________________

Any additional information relating to the request:

_______________________________________
_______________________________________

4. Contractor Details:

4.1 Accredited Entity for Connection

Where the connection to the Network will be made by an Accredited Entity following instruction from the Licensed Provider, please provide details of the Accredited Entity who will be carrying out the connection.

Accredited Entity (full name of company): _______________________________________
Contact name:  _______________________________________
Phone number:  _______________________________________
Mobile phone number:  _______________________________________
Email address:  _______________________________________
Preferred contact method:  _______________________________________

4.2 Accredited Entity for the installation of the revenue meter at the premises

Where the meter will be installed by an Accredited Entity following instruction from the Licensed Provider, please provide details of the Accredited Entity who will be carrying out the meter installation.
Accredited Entity (full name of company): _______________________________________
Contact name:    _______________________________________
Phone number:  _______________________________________
Mobile phone number: _______________________________________
Email address:  _______________________________________
Preferred contact method:  _______________________________________

5. **Connection Details:**
(Please also fill in Appendix A – Meter Size Data Assessment Sheet)

If an existing temporary connection for building water/site accommodation is intended to be converted to a permanent water connection, please indicate by ticking the box below, and provide the Scottish Water reference for the building water/site accommodation application

☐
Scottish Water reference for the building water/site accommodation connection application: _______________________________________

Number of water connections required at the premises:

Single water connection ☐

More than one water connection ☐ Please provide any additional information relating to the connections required and complete the remaining questions for each connection

Proposed date for water connection: _________________________

Size of connection required for normal/business use (excluding fire fighting):

25mm ☐ 32mm ☐

63mm ☐ 90mm ☐

Other ☐

If other please specify: _______________________________________

_______________________________________
Size of connection required for fire fighting element:

90mm  □  Other  □

If other please specify:  _______________________________________
_______________________________________
_______________________________________

Meter Details

Proposed physical size of the meter to be installed:

15mm  □  20mm  □  25mm  □
30mm  □  40mm  □  50mm  □
80mm  □  100mm  □  150mm  □
200mm □  250mm  □  300mm  □
80 - 20mm □  100 - 20mm  □  Other  □

If other please specify:  _______________________________________
_______________________________________
_______________________________________

Type of meter to be installed (from the Scottish Water Meter Menu)

Standard  □  Non-standard  □

Scottish Water Meter Menu reference ______________________________

Proposed date of installation ______________________________

Please indicate the proposed location of the new meter

□  Inside the property/building
□  Outside the property/building but within the premises/property boundary
□  Outside the premises/property boundary
□  To be determined on survey

Please provide a description of the proposed location (where available)
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
Will there be a discharge of Trade Effluent from the premises?

Yes ☐

No ☐

If yes, please provide Scottish Water’s Trade Effluent consent application reference (where available)  __________________________________

Additional information in relation to the connection:

___________________________________________

___________________________________________

Drawings/Calculations Provided with this Form

Please indicate what additional information is provided in support of this application and provide references where relevant. Please ensure all drawings comply with the applicable standards as set out in the current version of Water for Scotland.

☐ Site location plan (OS or GIS location _________________________)

☐ Scottish Water reference for associated sewerage application ______________________

or

☐ information relating to the disposal of water from the premises

☐ On-site design proposals (within property boundary)

☐ Off-site design proposals (from property boundary to the Scottish Water Network)

☐ Internal plumbing schematics

☐ Fire safety approval or evidence that this is not required

☐ Soil investigation report

☐ Scottish Water DIA reference number _________________________

☐ Scottish Water reference for related building water application ______________________

6. Building Water Supply:

Have you applied for building water or has there been a previous application by a third party for this site? (please tick appropriate box)

Yes ☐
Provide reference from previous application ___________________________

No  ❑

Please submit Form J or provide confirmation below

If water from Scottish Water’s Network was and will not be used for building purposes, please confirm by ticking the box below and state the source of water to be used for building purposes:

❑

______________________________________________________________

By confirming you will not use Scottish Water’s Network for building water, you also confirm that the water you do use is obtained legally and is fit for purpose. You will be required to prove this to Scottish Water if requested to do so.

7. Special Requirements:
In making this application Scottish Water will by default create a SPID pair with all relevant Sewerage Services attached. Do you wish to continue with this default position?

❑ Yes, a SPID pair is required
❑ No, a SPID pair is not required

If a SPID pair is not required, please tick the appropriate box below and provide relevant information:

❑ Only a Water SPID is required because an existing sewer connection (and SPID) is already in place.

Please provide the existing SPID reference: ___________________________

Where no SPID is available, please provide any further information to assist in cross-referencing the application, e.g. Scottish Water Service Request number or any other application reference, date of application, Licensed Provider reference etc.

❑ Only a Water SPID is required because the Non-Household Customer is using another Licensed Provider for their Sewerage SPID.
❑ Only a Water SPID is required because the Non-Household Customer will only use Water Services.
❑ a SPID pair with Water and Waste but no Roads and Property Drainage is required.
8. Request for Track Inspection, pressure testing or bacteriological sampling

Please indicate the type of inspection required (please tick all that apply):

☐  Track Inspection. Please complete section 8.1
☐  Pressure test. Please complete section 8.2
☐  Bacteriological sampling. Please complete section 8.3

8.1 Track Inspection

Please provide a suitable contact for the Track inspection

Name

Company

Job title

Telephone number

Mobile telephone number

Email

Preferred contact method: ________________________________

Preferred date(s) for Track Inspection __________________________

Proposed date of connection __________________________

Where available, please provide the most complete postal address information for the property.

This address will be used to create the SPID address.

Occupier (anticipated): ________________________________

Building number: ________________________________
Building name: ________________________________
Address line 1: ________________________________
Address line 2: ________________________________
Address line 3: ________________________________
Town: ________________________________
Postcode: ________________________________

Please provide the unique property reference number(s) requested below:

SAA Reference Number: _____________________________
UPRN: _____________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Agricultural land, buildings and troughs
- Property is multi-tenancy
- Infrastructure Project
- Parks, Allotments and Sports Ground
- Agricultural including troughs
- Property is multi-tenancy
- Not yet issued by planning
- Other (please provide details) _______________________________________

Unique property reference number (if available): _____________________________

8.2 Pressure test

Please provide a suitable contact for the pressure test

Name: ________________________________
Company: ________________________________
Job title: ________________________________
Telephone number: ________________________________
Mobile telephone number: ________________________________

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2 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.

*Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk, or alternative sources as agreed with Scottish Water.
Email: ________________________________
Preferred contact method: ________________________________
Preferred date(s) for pressure test: __________________________
Proposed date of connection: __________________________

8.3 Bacteriological sampling
Please provide a suitable contact for the bacteriological sampling
Name: ________________________________
Company: ________________________________
Job title: ________________________________
Telephone number: ________________________________
Mobile telephone number: ________________________________
Email: ________________________________
Preferred contact method: ________________________________
Preferred date(s) for bacteriological sampling: __________________________
Proposed date of connection: __________________________

9. Change/Resubmission of Application Details
Please indicate where changes to the previous application form are required by ticking the appropriate box below, and provide the updated details in the relevant section. Please tick all boxes that are appropriate. Where there is a material change to an application it will be deemed as a new application.

- [ ] Reason for Request
- [ ] Premises to be Connected
- [ ] Contractor Details
- [ ] Connection Details
- [ ] Drawings/Calculations Provided with this Form
- [ ] Building Water Supply
- [ ] Special Requirements
- [ ] Request for Track Inspection, pressure testing or bacteriological sampling

Please provide any additional information in relation to the change.
10. Confirmation of Completion of Connection

Are all the details of the connection the same as those provided in this form?

☐ Yes
☐ No

Where details have changed please update the relevant details and resubmit the form.

Please confirm the date when the connection was carried out ________________________

Please confirm the Accredited Entity who carried out the connection:

Accredited Entity (full name of company): ________________________________

Confirmation of Address

Please provide the SPID and postal address details below. Please provide as much detail as possible.

Supply Point ID (SPID) ________________________________

Unique property reference number (if available): 4 ________________________________

Company Name: ________________________________

Building Number: ________________________________

Building Name: ________________________________

Address line 1: ________________________________

Address line 2: ________________________________

Address line 3: ________________________________

Town: ________________________________

Postcode: ________________________________

Owner of the premises

Name or company name ________________________________

4 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
Address _____________________________________
_____________________________________
Postcode _____________________________________

Is the premises intended to be multi-tenancy?
Yes ☐
No ☐
Don’t Know ☐
If yes, please provide any additional information, such as number of units and unit addresses.
________________________________________________________________________
________________________________________________________________________

Details of Meter Installed

Meter serial number: _________________________________________
Meter make: _________________________________________
Meter size: _________________________________________
No. of Dials: _________________________________________

Date of meter installation _____________________________________
Opening Meter Read _____________________________________

Photograph of meter included: ☐
Byelaws certificate included: ☐

Please confirm the location of the new meter
☐ Inside the property/building
☐ Outside the property/building but within the premises/property boundary
☐ Outside the premises/property boundary

x,y co-ordinates: _________________________________________

Please provide a description of the location of the meter
________________________________________________________________________
Installer details:
Accredited Entity (full name of company): _______________________________________

x,y co-ordinates:   _________________________________________

Please tick the box below if there is any data logging equipment attached to the meter.
☐ Where data logging equipment is attached to the meter, please provide the details below.

Datalogger make   _____________________________________
Datalogger model/type   _____________________________________
Datalogger serial number  _____________________________________
Date of Datalogger installation  _____________________________________

☐ Please provide “as built” drawings with this form.
☐ Please provide the Technical Approval reference number ______________________

11. Declaration:

11.1 Declaration upon application for approval to connect to the Scottish Water Network
I/We hereby make application to Scottish Water for a supply of water as detailed above.
I/We undertake to abide by the terms and conditions of current Scottish Water Byelaws on date of application.
I/We understand that any alterations made to this application must be declared to Scottish Water.  
I/We have filled in all the relevant sections of this form.  The details I/We have given with this application are accurate.
I/We have read and understood the supporting guidance notes.
I/We have enclosed all the necessary supporting documentation.
I/We declare that the supporting documentation provided with this application complies with the applicable standards as set out in the current version of ‘Water for Scotland’.

11.2 Declaration upon application for Track Inspection, pressure testing or bacteriological sampling
I/We declare that the connection is ready for Track Inspection, pressure testing and/or bacteriological sampling as indicated above.

I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

11.3 Declaration upon completion of connection to the Scottish Water Network

I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

I/We have enclosed all the necessary supporting documentation, including “as built” drawings, meter details and sampling results, as appropriate.

Your details:

Signature: ______________________________  Date: ______________

Full name (in capitals): ______________________________________________

Role in the company or job title: ________________________________________
## Appendix – Meter Size Data Assessment Sheet:

Proposed number of meters: __________

### 1. Site Information

<table>
<thead>
<tr>
<th>Details of all available data items should be completed.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Meter</strong></td>
</tr>
<tr>
<td>Size of any existing meters or “NEW” for new meters:</td>
</tr>
<tr>
<td>Any existing meter serial numbers:</td>
</tr>
<tr>
<td>Supply pressure (Bar) if known:</td>
</tr>
<tr>
<td>Diameter of incoming pipe into building/premises (mm):</td>
</tr>
<tr>
<td>Fire supply (Y/N):</td>
</tr>
<tr>
<td>If YES, please complete section 4 – Fire Supplies</td>
</tr>
<tr>
<td>Contaminated land (Y/N):</td>
</tr>
<tr>
<td>Operational time period (hours):</td>
</tr>
<tr>
<td>Please select one of the following: ,8; 8-12; 12</td>
</tr>
<tr>
<td>If no time period is selected, 24 hours will be used as the default</td>
</tr>
</tbody>
</table>

### 2. Number of Water Fittings

<table>
<thead>
<tr>
<th>Please provide details of the number of water fittings (as listed) and indicate whether they are fed from the mains or from a storage tank. If no information is available please complete section 3 – Flowrate.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Meter</strong></td>
</tr>
<tr>
<td>Storage tank supply pipe size (mm):</td>
</tr>
<tr>
<td>WC flushing cistern:</td>
</tr>
<tr>
<td>Domestic sized wash basin:</td>
</tr>
<tr>
<td>Commercial sized wash basin:</td>
</tr>
</tbody>
</table>
3. Flowrate

Where no information is available for the number of water fittings, please complete either section 3.1 or 3.2.

<table>
<thead>
<tr>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
</table>

### 3.1 From Logging Data
Please provide details of all three flowrates requested.

- Minimum (l/sec):
- Maximum (l/sec):
- Typical (l/sec):

### 3.2 Estimate of Flowrate
Please provide details for the daily water requirement.

- Daily requirement (l/day):

---

4. Fire Supplies

Please provide details for the number of fire supplies and their estimated flowrates.
<table>
<thead>
<tr>
<th>Meters</th>
<th>Meters</th>
<th>Meters</th>
<th>Meters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meter 1</td>
<td>Meter 2</td>
<td>Meter 3</td>
<td>Meter 4</td>
</tr>
</tbody>
</table>

5. Meter Requirements

Please indicate whether there is power available at the site if a meter that requires power is being selected from the meter menu.

<table>
<thead>
<tr>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Power available (Y/N)</td>
<td>Power available (Y/N)</td>
<td>Power available (Y/N)</td>
<td>Power available (Y/N)</td>
</tr>
</tbody>
</table>
Form B

Application for an Individual Premises Sewerage Connection
For Use by Licensed Providers

Application for an Individual Premises Sewerage Connection
For Use by Licensed Providers

This form sets out the information required to request an offer of connection to the Public Sewerage System from Scottish Water for an individual premises Part 1 sewerage connection. The form is divided into sections, as follows:

1) Licensed Provider Details
2) Reason for the Request
3) Premises to be Connected
4) Contractor Details
5) Connection Details
6) Building Water Supply
7) Special Requirements
8) Request for Track Inspection
9) Change/Resubmission of Application Details
10) Confirmation of Completion of Connection
11) Declaration

The relevant sections of the form should be completed and submitted to Scottish Water in the following stages:

1. Application for approval for a connection to the Public Sewerage System – sections 1-7;
2. providing a minimum of 5 Business Days advance notice, a request for Track Inspection – section 8;
3. (where applicable) following any change to the details of the application for connection – section 9;
4. following the connection to the Public Sewerage System, Confirmation of Completion of Connection – section 10.

The Licensed Provider must complete a declaration (section 11) at each stage of the application. The form should also be resubmitted where any details previously provided have been updated. Mandatory information will vary depending on the stage of the process.
It should be noted that this is the Operational Code version of the form; it may be presented in alternative formats as appropriate (such as an internet-based format); the content will be as presented here.

1. **Licensed Provider Details:**

   Licensed Provider  ______________________________
   Licensed Provider ID:  ______________________________
   Licensed Provider's own Reference:  ______________________________
   Contact name:  ______________________________
   Contact number:  ______________________________
   Contact e-mail:  ______________________________

   **Nominated contact for access to Scottish Water's customer portal**
   Licensed Providers may nominate one third-party (non-Licensed Provider) contact who will have access to view the application details through Scottish Water’s customer portal. If such access is required, please provide details below.

   Company name:  ______________________________
   Contact name:  ______________________________
   Contact number:  ______________________________
   Contact e-mail:  ______________________________

2. **Reason for the Request:**

   Please indicate the reason for the request and complete the relevant section below.

   - [ ] Request for approval to carry out a connection to the Public Sewerage System.
   
     Please complete sections 3-7

   - [ ] Request for Scottish Water to carry out a Track Inspection. Please provide the previous Scottish Water reference for the connection application  ______________________________. Please complete section 8.
☐ Change to an application for a connection to the Public Sewerage System. Please provide the previous Scottish Water reference for the connection application ______________________. Please complete section 9.

☐ Re-submission of an application for a connection to the Public Sewerage System following a rejected or lapsed application or completion of a DIA. Please provide the previous Scottish Water reference for the connection application ______________________. Please complete section 9.

☐ Notice of completion of a connection to the Public Sewerage System. Please provide the previous Scottish Water reference for the connection application ______________________. Please complete section 10.

3. Premises to be Connected:

Please indicate the type of premises at which the new connection is required

New build ☐
Existing ☐ Please complete section 3.1 in addition to section 3

Please quote any
Scottish Water reference previously given to your site __________

Address of new premises
Plot/Unit ______________________________
Building Number ______________________________
Building Name ______________________________
Site ______________________________
Street ______________________________
Town ______________________________
Postcode (or area code)____________________________
Please provide the unique property reference number(s) requested below.

<table>
<thead>
<tr>
<th>SAA Reference Number:</th>
<th>UPRN:</th>
</tr>
</thead>
</table>

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Agricultural land, buildings and troughs
- Infrastructure Project
- Parks, Allotments and Sports Ground
- Agricultural including troughs
- Property is multi-tenancy
- Not yet issued by planning
- Other (please provide details)

Where the UPRN is not available, please provide a valid supporting reason(s) below:

- Other (please provide details)

Unique property reference number (if available): 6

Owner of the premises

Name or company name

Address

Postcode

Is the premises intended to be multi-tenancy?

- Yes
- No
- Don't Know

If yes, please provide any additional information, such as number of units and unit addresses.

---

5 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.

6 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
Type of premises (please tick appropriate box)

- Hospital ☐ Prison ☐
- School ☐ Care Home ☐
- Warehouse ☐ Factory ☐
- Agriculture ☐ Shop ☐
- Holiday Chalets ☐ Hotel ☐
- Office ☐ Other ☐

If other, please specify:
_________________________________________
_________________________________________
_________________________________________

Are there any potential contaminated land issues relating to your site?

Yes ☐
No ☐

If yes, please indicate investigation measures adopted:
_________________________________________
_________________________________________
_________________________________________

Planning reference: __________________________
Date: __________________________
Local Authority Area: __________________________

Are you required to work on third party land?

Yes ☐
No ☐

If yes, please forward written permission from the land owner.

Number of persons to be employed in the development and, where appropriate, the number of residents to be accommodated in the development, e.g., if a hotel:
_________________________________________
_________________________________________
3.1 New Sewerage Connection at Existing Premises

Supply Point ID
______________________________________
Postal address of premises
______________________________________
______________________________________
Postcode(s):
_________________________

Reason for the new connection:

☐ Replacement of existing connection (e.g. increase/decrease size)
☐ New connection required in addition to the existing connection (e.g. extension of premises)
☐ No Sewerage connection at the property (e.g. septic tank)
☐ Other

If other please specify:
______________________________________
______________________________________
______________________________________

Any additional information relating to the request:
______________________________________
______________________________________
______________________________________

4. Contractor Details:

The name of the contactor who will undertake the work on site:

Name of contractor: ________________________________
Contact name (if company name entered above): ____________________________
Address: ________________________________
______________________________________________
Postcode: __________________________
Phone number: __________________________
Mobile phone number: __________________________
Fax number: __________________________
Email address: __________________________
5. **Connection Details:**

Anticipated date of public sewer connection: _______________________
Diameter of existing sewer: _______________________
Depth of existing sewer: _______________________

**Type of discharge:**

Domestic use only (e.g. office): ☐
Trade (e.g. factory): ☐

If Trade, please specify: ______________________________________
____________________________________
____________________________________

Will there be a discharge of Trade Effluent from the premises?
Yes ☐
No ☐

If yes, please provide Scottish Water’s Trade Effluent consent application reference (where available)  _______________________

Additional information in relation to the connection:
____________________________________
____________________________________

**Type of connection proposed:**

<table>
<thead>
<tr>
<th>Foul</th>
<th>Surface water</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of connections:  __________________  __________________  __________________
Diameter of connection:  __________________  __________________  __________________
Type of connection (Manhole, Saddle, Branch, etc.)

Please specify pipe material of your proposed connection

Anticipated annual water consumption from the site in cubic metres

How are you dealing with your surface water:

- Private soak-away system within plot
- Watercourse
- Surface Water sewer
- Combined sewer (only dealt with in exceptional circumstances)

Drawings/Calculations Provided with this Form

Please indicate what additional information is provided in support of this application and provide references where relevant. Please ensure all drawings comply with the applicable standards as set out in the current version of Sewers for Scotland.

- Site location plan (OS or GIS location)
- Scottish Water reference for associated water application

or

- information relating to the provision of water to the premises
- On-site design proposals (within property boundary)
- Off-site design proposals (from property boundary to the Scottish Water Network)
- Drainage layout proposal
- Flow control device calculations (if applicable)
- Soil Investigation (SI) report (if applicable)
- Written permission to carry out work on third party land (if applicable)
- Scottish Water DIA reference number
- Scottish Water reference for related building water application

6. Building Water Supply:
Have you applied for building water or has there been a previous application by a third party for this site? (please tick appropriate box)

**Yes** □

Provide reference from previous application ___________________________

**No** □

Please submit Form J or provide confirmation below

If water from Scottish Water’s Network was and will not be used for building purposes, please confirm by ticking the box below and state the source of water to be used for building purposes:

□

____________________________________________________________

____________________________________________________________

____________________________________________________________

By confirming you will not use Scottish Water’s Network for building water, you also confirm that the water you do use is obtained legally and is fit for purpose. You will be required to prove this to Scottish Water if requested to do so.

7. **Special Requirements:**

In making this application Scottish Water will by default create a SPID pair with all relevant Water Services attached. Do you wish to continue with this default position?

□ Yes, a SPID pair is required

□ No, a SPID pair is **not** required

If a SPID pair is not required, please tick the appropriate box below and provide relevant information:

□ Only a Sewerage SPID is required because an existing water connection (and SPID) is already in place, this should become a SPID pair.

Please provide the existing SPID reference: ___________________________

Where no SPID is available, please provide any further information to assist in cross-referencing the application, e.g. Scottish Water Service Request number or any other application reference, date of application, Licensed Provider reference etc.
Only a Sewerage SPID is required because the Non-Household Customer is using another Licensed Provider for their Water SPID.

Only a Sewerage SPID is required because the Non-Household Customer will only use Sewerage Services.

Other (please explain below):

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Please provide any additional information relating to the application as appropriate:

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

8. Request for Track Inspection

Contact for Track Inspection

Name: ________________________________
Company: ________________________________
Job title: ________________________________
Telephone number: ________________________________
Mobile telephone number: ________________________________
Email: ________________________________
Preferred contact method: ________________________________
Preferred date(s) for Track Inspection: ________________________________
Proposed date of connection: ________________________________

Where available, please provide the most complete postal address information for the property. This address will be used to create the SPID address.

Occupier (anticipated): ________________________________
Building number: ________________________________
Building name: ________________________________
Address line 1: ________________________________
Address line 2: ________________________________
Address line 3: ________________________________
Town: ________________________________
Postcode: ________________________________

Please provide the unique property reference number(s) requested below.

### SAA Reference Number:

<table>
<thead>
<tr>
<th>Reason</th>
<th>UPRN:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Property not yet rated</td>
<td></td>
</tr>
<tr>
<td>Missing entry from the OSG</td>
<td></td>
</tr>
<tr>
<td>Fish farms, fishing, and sporting rights</td>
<td></td>
</tr>
<tr>
<td>Property is multi-tenancy</td>
<td></td>
</tr>
<tr>
<td>Infrastructure Project</td>
<td></td>
</tr>
<tr>
<td>Agricultural including troughs</td>
<td></td>
</tr>
<tr>
<td>Parks, Allotments and Sports Ground</td>
<td></td>
</tr>
<tr>
<td>Other (please provide details)</td>
<td></td>
</tr>
</tbody>
</table>

### UPRN: _____________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Infrastructure Project
- Agricultural including troughs
- Parks, Allotments and Sports Ground
- Other (please provide details)

Where the UPRN is not available, please provide a valid supporting reason(s) below:

<table>
<thead>
<tr>
<th>Reason</th>
<th>UPRN:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Property not yet rated</td>
<td></td>
</tr>
<tr>
<td>Missing entry from the OSG</td>
<td></td>
</tr>
<tr>
<td>Fish farms, fishing, and sporting rights</td>
<td></td>
</tr>
<tr>
<td>Property is multi-tenancy</td>
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</tr>
<tr>
<td>Infrastructure Project</td>
<td></td>
</tr>
<tr>
<td>Agricultural including troughs</td>
<td></td>
</tr>
<tr>
<td>Parks, Allotments and Sports Ground</td>
<td></td>
</tr>
<tr>
<td>Other (please provide details)</td>
<td></td>
</tr>
</tbody>
</table>

Unique property reference number (if available): ________________________________

9. **Change/Resubmission of Application Details**

Please indicate where changes to the previous application form are required by ticking the appropriate box below, and provide the updated details in the relevant section. Please tick all boxes that are appropriate. Where there is a material change to an application it will be deemed as a new application.

---

7 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.

* Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
10. Confirmation of Completion of Connection

Are all the details of the connection the same as those provided in this form?

☐ Yes

☐ No

Where details have changed please update the relevant details and resubmit the form.

Please confirm the date the connection was carried out __________________________

Please confirm the contractor who carried out the connection:

Name of contractor: ________________________________________________

Contact name (if company name entered above): _______________________

Address: ________________________________________________________

Postcode: _____________________

Phone number: _____________________

Mobile phone number: _____________________

Email address: _____________________

Preferred contact method: _________________________________________
Confirmation of Address

Please provide the SPID and postal address details below. Please provide as much detail as possible.

Supply Point ID (SPID) ________________________________

Unique property reference number (if available): 9 ________________________________

Company Name: ________________________________

Building Number: ________________________________

Building Name: ________________________________

Address line 1: ________________________________

Address line 2: ________________________________

Address line 3: ________________________________

Town: ________________________________

Postcode: ________________________________

Owner of the premises

Name or company name ________________________________

Address ________________________________

______________________________

Postcode ________________________________

Is the premises intended to be multi-tenancy?

Yes ☐

No ☐

Don’t Know ☐

If yes, please provide any additional information, such as number of units and unit addresses.

________________________________________________________________________

________________________________________________________________________

☐ Please provide “as built” drawings with this form.

☐ Please provide the Technical Approval reference number ______________________

9 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
11. Declaration:

11.1 Declaration upon application for approval to connect to the Public Sewerage System

I/We hereby make application to Scottish Water to make a connection to the Public Sewerage System.
I/We undertake to abide by the terms laid down in ‘Sewers for Scotland’ an on this form.
I/We understand that sewer construction work may not commence until formal approval is given by Scottish Water.
I/We understand that any alterations made to this application must be declared to Scottish Water.
I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.
I/We have read and understood the supporting guidance notes.

11.2 Declaration upon application for Track Inspection

I/We declare that the connection is ready for Track Inspection.
I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

11.3 Declaration upon completion of connection to the Public Sewerage System

I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.
I/We have enclosed all the necessary supporting documentation, including “as built” drawings.

Your details

Signature: ___________________________ Date: ____________

Full name (in capitals): ________________________________

Role in the company or job title: ________________________________
Form C

Application for a New Water Mains/Trunk Mains/Service Reservoir Connection (a "Part 2/3" Water Connection) accompanied by Application for one or more Individual Premises Water Connections (a “Part 1” Water Connection)

For Use by Licensed Providers

This form sets out the information required to request an offer of connection to the Network from Scottish Water for a Part 2/3 water connection accompanied by application for one or more Part 1 water connection(s). The form is divided into sections, as follows:

1) Licensed Provider Details
2) Reason for the Request
3) Site Details
4) Part 2/3 Connection Details
5) Individual Premises to be Connected
6) Request for Track Inspection/s, pressure testing or bacteriological sampling
7) Change/Resubmission of Application Details
8) Confirmation of Completion of Connection/s
9) Declaration

The relevant sections of the form should be completed and submitted to Scottish Water in the following stages:

a. Application for approval for a Part 2/3 connection to the Scottish Water Network – sections 1-4; which may be submitted with or followed by,
b. an application for approval for one or more Part 1 connection/s to the Scottish Water Network – section 5;
c. providing a minimum of 5 Business Days advance notice, a request for one or more Track Inspection/s, pressure testing or bacteriological sampling – section 6;
d. where applicable, following any change to the details of the application for connection – section 7;
e. only where a connection has been carried out by an Accredited Entity following instruction from the Licensed Provider, Confirmation of Completion of Connection/s – section 8.

The Licensed Provider must complete a declaration (section 9) at each stage of the application. The form should also be resubmitted where any details previously provided have been updated. Mandatory information will vary depending on the stage of the process.
1. Licensed Provider Details:

Licensed Provider: ______________________________
Licensed Provider ID: ______________________________
Licensed Provider’s own reference: ______________________________
Contact name: ______________________________
Contact number: ______________________________
Contact e-mail: ______________________________

Nominated contact for access to Scottish Water’s customer portal
Licensed Providers may nominate one third-party (non-Licensed Provider) contact who will have access to view the application details through Scottish Water’s customer portal. If such access is required, please provide details below.

Company name: ______________________________
Contact name: ______________________________
Contact number: ______________________________
Contact e-mail: ______________________________

2. Reason for the Request

Please indicate the reason for the request and complete the relevant section below.

- [ ] Request for Scottish Water to carry out a Part 2/3 connection. Please complete sections 3 and 4.
- [ ] Request for Scottish Water to carry out one or more Part 1 connection/s. Please complete section 5.
- [ ] Request for approval to carry out a Part 2/3 connection using an Accredited Entity. Please complete section 3 and 4.
☐ Request for approval to carry out one or more Part 1 connection/s using an Accredited Entity. Please complete section 5.

☐ Request for Scottish Water to carry out a Track Inspection, pressure testing or bacteriological sampling. Please provide the previous Scottish Water reference for the connection application ________________ Please complete section 6

☐ Change to an application for a Part 2/3 connection followed by one or more Part 1 connection/s. Please provide the previous Scottish Water reference for the connection application ________________ Please complete section 7. Please note that where there is a material change to an application will be deemed as a new application.

☐ Re-submission of an application to carry out a Part 2/3 connection followed by one or more Part 1 connection/s, following a rejected or lapsed application or completion of a DIA. Please provide the previous Scottish Water reference for the connection application ________________ Please complete section 7.

☐ Notice of completion of connection a Part 2/3 connection followed by one or more Part 1 connection/s. Please provide the previous Scottish Water reference for the connection application ________________ Please complete section 8.

3. Site Details:

3.1 Main Details

Please provide any Scottish Water DIA reference previously given to your site ________________

Please provide any Scottish Water reference for a Part 2/3 sewer connection application previously given to your site ________________
Site or project name: ______________________________
Site address: ______________________________________
____________________________________
Postcode(s): ______________________________________
Phone number: ______________________________
Mobile phone number ____________________________
Email: _________________________________________
Preferred contact method: _______________________

Ordnance Survey ref (10 fig) _______________________

What was the previous use of this site:
Greenfield or agriculture □
Housing □
Industry □
Landfill □
Other □
If other please specify: ___________________________
_____________________________________

Are there any potential contaminated land issues relating to your site? (Tick appropriate box)
Yes □
No □

If yes, please indicate investigation measures adopted:
________________________________________________________________________
________________________________________________________________________

Additional Information in relation to the site:
________________________________________________________________________
________________________________________________________________________
Type of development

<table>
<thead>
<tr>
<th>Type</th>
<th>Number of Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Industrial</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Area of Site (ha)</td>
<td></td>
</tr>
</tbody>
</table>

Planning Permission

Date detailed planning permission received: __________________________
Local Authority Area: __________________________
Planning reference: __________________________

3.2 Land Owner and Development Details

3.2.1 Land Owner

Name of company: __________________________________________
Contact name (if company name entered above): ______________________
Address: _________________________________________________
                                        __________________________
Postcode:  _____________________
Phone number:  _____________________
Mobile phone number: _____________________
Email address: ___________________________
Preferred contact method: ______________________________________

3.2.2 Developer for the site

Name of company: __________________________________________
Contact name (if company name entered above): ______________________
Address: _________________________________________________
                                        __________________________
Postcode:  _____________________
Phone number:  _____________________
Mobile phone number: _____________________
Email address: ___________________________
Preferred contact method:  

3.2.3 Lead Contractor for the site
Name of company:  
Contact name (if company name entered above):  
Address:  
Postcode:  
Phone number:  
Mobile phone number:  
Email address:  
Preferred contact method:  

3.2.4 Consultant / Agent for the site
Name of company:  
Contact name (if company name entered above):  
Address:  
Postcode:  
Phone number:  
Mobile phone number:  
Email address:  
Preferred contact method:  

3.3 Phasing Information
Phasing information for installation of water main (please show extent of each phase on the site plan. Continue on a separate sheet if necessary)

Number of phases  

<table>
<thead>
<tr>
<th>Phase</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of plots</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plot numbers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Date works due to start ______________________
Date water mains being installed ______________________
Anticipated date for first occupation ______________________
Anticipated date of phase completion ______________________
Number of Part 2/3 connections ______________________
Anticipated date for final completion ______________________

3.4 Building Water Supply

Have you applied for building water or has there been a previous application by a third party for this site? (please tick appropriate box)

Yes ☐

Provide reference from previous application (where available) ______________________

No ☐

Please submit Form J or provide confirmation below

If water from Scottish Water’s Network was and will not be used for building purposes, please confirm by ticking the box below and state the source of water to be used for building purposes:

☐

____________________________________________________________

____________________________________________________________

____________________________________________________________

By confirming you will not use Scottish Water’s Network for building water, you also confirm that the water you do use is obtained legally and is fit for purpose. You will be required to prove this to Scottish Water if requested to do so.

3.5 Health and Safety Details

3.5.1 Client Details:

Name: ______________________

Phone Number: ______________________
4. **Part 2/3 Connection Details**

4.1 **Accredited Entity for the Trunk/Mains/Service Reservoir Connection (“Part 2/3”)**

Please complete this section where the Part 2/3 connection to the Network will be made by an Accredited Entity following instruction from of the Licensed Provider.

**Accredited Entity (full name of company):** _______________________________________

**Contact name:** _______________________________________

**Phone number:** _______________________________________

**Mobile phone number:** _______________________________________

**Email address:** _______________________________________

**Preferred contact method:** _______________________________________

4.2 **Total demand for Part 2/3 Connection**

- Domestic purposes [ ]
- Non-domestic purposes [ ]
- A mixture of both [ ]

What will the combined daily consumption be? _______ (litres)

How many fire supplies do you need? ___________

Please indicate the number of staff/residents associated with your development? ___________

4.3 **Proposed Size of Part 2/3 Connection**

Please indicate the proposed size of the Part 2/3 connection in your design:

- [ ] 30mm (32mm outside diameter)
- [ ] 50mm (63mm outside diameter)
- [ ] 80mm (90mm outside diameter)
- [ ] 100mm (110/125mm outside diameter)
- [ ] 150mm (160/180mm outside diameter)
- [ ] 200mm (225mm outside diameter)
- [ ] Other

If other please specify: ______________________________________

___________________________________
4.4 Additional Information in Support of the Part 2/3 Connection Application

Please indicate what additional information is provided in support of this application and provide references where relevant. Please ensure all drawings comply with the applicable standards as set out in the current version of Water for Scotland.

- Site location plan (OS or GIS location) _________________________
- On-site design proposals (within property boundary)
- Off-site design proposals (from property boundary to the Scottish Water Network)
- Health and safety statement
- Local fire authority approval
- Roads adoption letter
- Soil investigation report
- Scottish Water DIA reference number _________________________
- Scottish Water reference for related building water application _____________________

5. Individual Premises to be Connected:

Number of premises to be connected __________

5.1 Individual Premises Details

Please provide details for each individual premises to be connected. Continue on a separate sheet if necessary.

Phase of development _________________________

Address of new premises

Plot/Unit _________________________
Building Number _________________________
Building Name _________________________
Site _________________________
Street _________________________
Town _________________________
Postcode (or area code) ______________________________

Please provide the unique property reference number(s) requested below:

SAA Reference Number: _____________________________

UPRN: _____________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Agricultural land and buildings
- Property is multi-tenancy
- Infrastructure Project
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Infrastructure Project
- Other (please provide details)

Where the UPRN is not available, please provide a valid supporting reason(s) below:

- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Infrastructure Project
- Property is multi-tenancy
- Infrastructure Project
- Not yet issued by planning
- Other (please provide details)

Unique property reference number (if available): 11

Owner of the premises

Name or company name _____________________________________

Address   _____________________________________

Postcode   _____________________________________

Is the premises intended to be multi-tenancy?

- No
- Yes
- Don’t know

If yes, please provide any additional information, such as number of units and unit addresses.

---

10 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.

11 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
Type of premises (please tick appropriate box)

- Hospital ☐ Prison ☐
- School ☐ Care Home ☐
- Warehouse ☐ Factory ☐
- Agriculture ☐ Shop ☐
- Holiday Chalets ☐ Hotel ☐
- Office ☐ Other ☐

If other, please specify: ____________________________________________
__________________________________________
__________________________________________

If an existing temporary connection for building water/site accommodation is intended to be converted to a permanent water connection, please indicate by ticking the box below, and provide the Scottish Water reference for the building water/site accommodation application

☐

Scottish Water reference for the building water/site accommodation connection application: __________________________

Number of water connections required at the premises:

- Single water connection ☐
- More than one water connection ☐ Please provide any additional information relating to the connections required and complete the remaining questions for each connection

Do you require water to be supplied at three storeys or above (or equivalent height)?

- Yes ☐
- No ☐

Anticipated annual water consumption _________ m³

Proposed date for water connection: _________________________
Size of connection required for normal/business use (excluding fire fighting):

<table>
<thead>
<tr>
<th>Size</th>
<th>25mm</th>
<th>32mm</th>
<th>63mm</th>
<th>90mm</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

If other please specify: _______________________________________

Size of connection required for fire fighting element:

<table>
<thead>
<tr>
<th>Size</th>
<th>90mm</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

If other please specify: _______________________________________

**Meter Details**

*(Please also fill in Appendix A – Meter Size Data Assessment Sheet)*

Proposed physical size of the meter to be installed:

<table>
<thead>
<tr>
<th>Size</th>
<th>15mm</th>
<th>20mm</th>
<th>25mm</th>
<th>30mm</th>
<th>40mm</th>
<th>50mm</th>
<th>80mm</th>
<th>100mm</th>
<th>150mm</th>
<th>200mm</th>
<th>250mm</th>
<th>300mm</th>
<th>80 - 20mm</th>
<th>100 - 20mm</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
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<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

If other please specify: _______________________________________

Type of meter to be installed (from the Scottish Water Meter Menu)

<table>
<thead>
<tr>
<th>Type</th>
<th>Standard</th>
<th>Non-standard</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Scottish Water Meter Menu reference ______________________________

Proposed date of installation _____________________________________

Please indicate the proposed location of the new meter

☐ Inside the property/building
Outside the property/building but within the premises/property boundary
Outside the premises/property boundary
To be determined on survey

Please provide a description of the proposed location (where available)
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Will there be a discharge of Trade Effluent from the premises?
Yes  □
No   □

If yes, please provide Scottish Water’s Trade Effluent consent application reference (where available)  __________________________________

Additional information in relation to the connection:
___________________________________________________________________
___________________________________________________________________

5.2 Accredited Entity for individual Premises (“Part 1”) Connection
Where the connection to the Network will be made by an Accredited Entity following instruction from the Licensed Provider, please provide details of the Accredited Entity who will be carrying out the connection.

Accredited Entity (full name of company): ________________________________
Contact name: __________________________________________
Phone number: __________________________________________
Mobile phone number: ____________________________________
Email address: __________________________________________
Preferred contact method: ____________________________________

5.3 Accredited Entity for the installation of the revenue meter at the premises
Where the installation of meters on site will be carried out by an Accredited Entity following instruction from the Licensed Provider, please provide details of the Accredited Entity who will be carrying out the meter installation.
Accredited Entity (full name of company): _______________________________________
Contact name:    _______________________________________
Phone number:  _______________________________________
Mobile phone number: _______________________________________
Email address:  _______________________________________
Preferred contact method:  _______________________________________

5.4 Special Requirements

In making this application Scottish Water will by default create a SPID pair with all relevant Sewerage Services attached. Do you wish to continue with this default position?

☐ Yes, a SPID pair is required
☐ No, a SPID pair is not required

If a SPID pair is not required, please tick the appropriate box below and provide relevant information:

☐ Only a Water SPID is required because an existing sewer connection (and SPID) is already in place.

Please provide the existing SPID reference:  ___________________________

Where no SPID is available, please provide any further information to assist in cross-referencing the application, eg. Scottish Water Service Request number or any other application reference, date of application, Licensed Provider reference etc.

☐ Only a Water SPID is required because the Non-Household Customer is using another Licensed Provider for their Sewerage SPID.

☐ Only a Water SPID is required because the Non-Household Customer will only use Water Services.

☐ a SPID pair with Water and Waste but no Roads and Property Drainage is required.

☐ Other (please explain below):

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Please provide any additional information relating to the application as appropriate:
5.5 Additional Information in Support of the Part 1 Connection Application

Please indicate what additional information is provided in support of this application and provide references where relevant. Please ensure all drawings comply with the applicable standards as set out in the current version of Water for Scotland.

- Site location plan (OS or GIS location ________________________)
- Scottish Water reference for associated sewerage application ______________________
- or
- information relating to the disposal of water from the premises
- On-site design proposals (within property boundary)
- Off-site design proposals (from property boundary to the Scottish Water Network)
- Internal plumbing schematics
- Fire safety approval or evidence that this is not required
- Soil investigation report
- Scottish Water DIA reference number ________________________
- Scottish Water reference for related building water application ________________________

6. Request for Track Inspection/s, pressure testing or bacteriological sampling

6.1 Track Inspection/s

Please indicate the type of Track Inspection required:

- Track Inspection for Part 2/3 connection only
- Track Inspection/s for Part 1 connection/s only Please indicate the number of Part 1 connections ready for Track Inspection _________
- Track Inspection/s for both Part 2/3 and Part 1 connection/s Please indicate the number of Part 1 connections ready for Track Inspection _________

Please provide the following details for all Track Inspections requested

Connection ID ______________
Contact for Track Inspection

Name ________________________________
Company ________________________________
Job title ________________________________
Telephone number ________________________________
Mobile telephone number ________________________________
Email ________________________________
Preferred contact method: _______________________________________
Preferred date(s) for Track Inspection __________________________
Proposed date of connection __________________________

Additional Information for Part 1 Connection/s

Where available, please provide the most complete postal address information for the property. This address will be used to create the SPID address.

Occupier (anticipated): ________________________________
Building number: ________________________________
Building name: ________________________________
Address line 1: ________________________________
Address line 2: ________________________________
Address line 3: ________________________________
Town: ________________________________
Postcode: ________________________________

Please provide the unique property reference number(s) requested below:

SAA Reference Number: ________________________________
UPRN: ________________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

Property not yet rated ☐ ☐  Missing entry from the OSG

Where the UPRN is not available, please provide a valid supporting reason(s) below:

12 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
<table>
<thead>
<tr>
<th>Missing entry from the SAA</th>
<th>Fish farms, fishing, and sporting rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agricultural land, buildings and troughs</td>
<td>Property is multi-tenancy</td>
</tr>
<tr>
<td>Fish farms, fishing, and sporting rights</td>
<td>Infrastructure Project</td>
</tr>
<tr>
<td>Parks, Allotments and Sports Ground</td>
<td>Agricultural including troughs</td>
</tr>
<tr>
<td>Property is multi-tenancy</td>
<td>Not yet issued by planning</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (please provide details)</td>
<td>Other (please provide details)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Unique property reference number (if available): 13</td>
<td></td>
</tr>
</tbody>
</table>

### 6.2 Pressure test

Please indicate the connection/s on which the pressure test is to be carried out:

- [ ] Pressure test for Part 2/3 connection only
- [ ] Pressure test for Part 1 connection/s only
  
  Please indicate the number of Part 1 connections ready for pressure testing _______

- [ ] Pressure tests for both Part 2/3 and Part 1 connection/s
  
  Please indicate the number of Part 1 connections ready for pressure testing _______

Please provide the following details for all pressure tests requested:

- Connection ID _______________
- Contact for pressure testing
  - Name ________________________________
  - Company ________________________________
  - Job title ________________________________
  - Telephone number ________________________________
  - Mobile telephone number ________________________________
  - Email ________________________________
  - Preferred contact method: ________________________________
  - Preferred date(s) for pressure test ________________________________

---

45 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
6.3 Bacteriological sampling

Please indicate the connection/s on which the bacteriological sampling is to be carried out:

- Bacteriological sampling for Part 2/3 connection only
- Bacteriological sampling for Part 1 connection/s only
  Please indicate the number of Part 1 connections ready for bacteriological sampling
  ____________
- Bacteriological samplings for both Part 2/3 and Part 1 connection/s
  Please indicate the number of Part 1 connections ready for bacteriological sampling
  ____________

Please provide the following details for all bacteriological samplings requested

Connection ID _______________

Contact for bacteriological sampling

- Name ________________________________
- Company ________________________________
- Job title ________________________________
- Telephone number ________________________________
- Mobile telephone number ________________________________
- Email ________________________________
- Preferred contact method: ________________________________
- Preferred date(s) for bacteriological sampling ________________________________
- Proposed date of connection ________________________________

7. Change/Resubmission of Application Details

Please indicate where changes to the previous application form are required by ticking the appropriate box below, and provide the updated details in the relevant section. Please tick all boxes that are appropriate. Where there is a material change to an application it will be deemed as a new application.

- Reason for Request
- Site Details
8. Confirmation of Completion of Connection/s

This section should only be completed where notice of intent to carry out connection works using an accredited third party has already been provided to Scottish Water.

Please indicate the type of connection which has been completed and provide details in the relevant section:

- Part 2/3 connection Please complete section 8.2.1
- Part 1 connection Please complete section 8.2.2

8.2.1 Part 2/3 Connection Completion Details

Please confirm the date the connection was carried out __________________________

Please confirm the Accredited Entity who carried out the connection:

Accredited Entity (full name of company): __________________________

- Please provide "as built" drawings with this form.
- Please provide the Technical Approval reference number __________________

8.2.2 Part 1 Connection Completion Details

Please complete these details upon completion of each Part 1 connection at the site.

Please confirm the number of completed Part 1 connections to be updated _____

Connection ID ______________
Supply Point ID (SPID) ________________________________

Are all the details of the connection the same as those provided in section 5.1 of this form?

☐ Yes
☐ No

Where details have changed please update the relevant detail in section 5.1 and resubmit the form.

Please confirm the actual date of connection ____________________________

Please confirm the Accredited Entity who carried out the connection:
Accredited Entity (full name of company): _______________________________________

Confirmation of Address
Please provide the postal address details below. Please provide as much detail as possible.

Supply Point ID (SPID) ________________________________
Unique property reference number (if available): 14 ________________________________
Company Name: ________________________________
Building Number: ________________________________
Building Name: ________________________________
Address line 1: ________________________________
Address line 2: ________________________________
Address line 3: ________________________________
Town: ________________________________
Postcode: ________________________________

Owner of the premises
Name or company name ________________________________
Address ________________________________
Postcode ________________________________

14 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
Is the premises intended to be multi-tenancy?
Yes ☐
No ☐
Don’t Know ☐
If yes, please provide any additional information, such as number of units and unit addresses.
________________________________________________________________________
________________________________________________________________________

Details of Meter installed

Meter serial number: ________________________________
Meter make: _________________________________________
Meter size: _________________________________________
No. of Dials: _________________________________________

Date of meter installation ______________________________
Opening Meter Read _________________________________

Photograph of meter included: ☐
Byelaws certificate included: ☐

Please confirm the location of the new meter
☐ Inside the property/building
☐ Outside the property/building but within the premises/property boundary
☐ Outside the premises/property boundary

x,y co-ordinates: ________________________________

Please provide a description of the location of the meter
________________________________________________________________________
________________________________________________________________________

Installer details:
Accredited Entity (full name of company): _______________________________________

x,y co-ordinates:   _________________________________________

Please tick the box below if there is any data logging equipment attached to the meter.

☐ Where data logging equipment is attached to the meter, please provide the details below.

Datalogger make   _____________________________________
Datalogger model/type   _____________________________________
Datalogger serial number  _____________________________________
Date of Datalogger installation  _____________________________________

☐ Please provide "as built" drawings with this form.
☐ Please provide the Technical Approval reference number ______________________

9. Declaration:

9.1 Declaration upon application for approval to connect to the Scottish Water Network

I/We hereby make application to for the provision of water to serve the above development.

I/We understand that construction of the water main may not commence until formal approval is given by Scottish Water.

I/We understand that any alterations made to this application must be declared to Scottish Water.

I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

I/We have read and understood the supporting guidance notes.

I/We have enclosed all the necessary supporting documentation.

I/We declare that the supporting documenting provided with this application complies with the applicable standards as set out in the current version of 'Water for Scotland'.

I/We declare that the supporting documenting provided with this application complies with the applicable standards as set out in the current version of 'Water for Scotland'.
9.2 Declaration upon application for Track Inspection, pressure testing or bacteriological sampling

I/We declare that the connections indicated are ready for Track Inspection, pressure testing and/or bacteriological sampling as indicated above.

I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

9.3 Declaration upon confirmation of connection to the Scottish Water Network

I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

I/We have enclosed all the necessary supporting documentation, including “as built” drawings, meter details and sampling results, as appropriate.

Your details:

Signature: ______________________________  Date: ______________  

Full name (in capitals): ______________________________________________

Role in the company or job title: ______________________________
A. Appendix – Meter Size Data Assessment Sheet:

Proposed number of meters: ________

<table>
<thead>
<tr>
<th>1. Site Information</th>
<th>Details of all available data items should be completed.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Meter 1</td>
</tr>
<tr>
<td>Size of any existing meters or “NEW” for new meters:</td>
<td></td>
</tr>
<tr>
<td>Any existing meter serial numbers:</td>
<td></td>
</tr>
<tr>
<td>Supply pressure (Bar) if known:</td>
<td></td>
</tr>
<tr>
<td>Diameter of incoming pipe into building/premises (mm):</td>
<td></td>
</tr>
<tr>
<td>Fire supply (Y/N):</td>
<td></td>
</tr>
<tr>
<td>If YES, please complete section 4 – Fire Supplies</td>
<td></td>
</tr>
<tr>
<td>Contaminated land (Y/N):</td>
<td></td>
</tr>
<tr>
<td>Operational time period (hours):</td>
<td></td>
</tr>
<tr>
<td>Please select one of the following: 8; 8-12; 12</td>
<td></td>
</tr>
<tr>
<td>If no time period is selected, 24 hours will be used as the default</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Number of Water Fittings</th>
<th>Please provide details of the number of water fittings (as listed) and indicate whether they are fed from the mains or from a storage tank. If no information is available please complete section 3 – Flowrate.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Meter 1</td>
</tr>
<tr>
<td>Storage tank supply pipe size (mm):</td>
<td>Mains</td>
</tr>
<tr>
<td>WC flushing cistern:</td>
<td></td>
</tr>
<tr>
<td>Domestic sized wash basin:</td>
<td></td>
</tr>
<tr>
<td>Commercial sized wash basin:</td>
<td></td>
</tr>
</tbody>
</table>
3. Flowrate

Where no information is available for the number of water fittings, please complete either section 3.1 or 3.2.

<table>
<thead>
<tr>
<th></th>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>3.1 From Logging Data</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minimum (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Typical (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3.2 Estimate of Flowrate</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daily requirement (l/day):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Fire Supplies

Please provide details for the number of fire supplies and their estimated flowrates.
<table>
<thead>
<tr>
<th></th>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of fire hydrants:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estimated flowrate (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of fire hoses:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estimated flowrate (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of sprinkler system heads:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estimated flowrate (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Meter Requirements

Please indicate whether there is power available at the site if a meter that requires power is being selected from the meter menu.

<table>
<thead>
<tr>
<th></th>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Power available (Y/N):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Form D

Application for a Sewerage Mains/Trunk Sewer/Waste Water System Connection (a “Part 2/3” Sewerage Connection) accompanied by Application for one or more Individual Premises Sewerage Connections (a “Part 1” Sewerage Connection)

For Use by Licensed Providers

This form sets out the information required to request an offer of connection to the Public Sewerage System from Scottish Water for a Part 2/3 sewerage connection accompanied by application for one or more Part 1 sewerage connection(s). The form is divided into sections, as follows:

1) Licensed Provider Details
2) Reason for the Request
3) Site Details
4) Part 2/3 Connection Details
5) Individual Premises to be Connected
6) Request for Track Inspection/s
7) Change/Resubmission of Application Details
8) Confirmation of Completion of Connection/s
9) Declaration

The relevant sections of the form should be completed and submitted to Scottish Water in the following stages:

1. Application for approval for a Part 2/3 connection to the Public Sewerage System – sections 1-4; which may be submitted with or followed by,
2. an application for approval for one or more Part 1 connection/s to the Public Sewerage System – section 5; then,
3. providing a minimum of 5 Business Days advance notice, a request for one or more Track Inspection/s – section 6; then, where applicable,
4. where applicable, following any change to the details of the application for connection – section 7; then,
5. following a connection to the Public Sewerage System, Confirmation of Completion of Connection/s – section 8.
The Licensed Provider must complete a declaration (section 9) at each stage of the application. The form should also be resubmitted where any details previously provided have been updated. Mandatory information will vary depending on the stage of the process.

It should be noted that this is the Operational Code version of the form; it may be presented in alternative formats as appropriate (such as an internet-based format); the content will be as presented here.

1. **Licensed Provider Details:**

Licensed Provider: ______________________________
Licensed Provider ID: ______________________________
Licensed Provider's own Reference: ______________________________
Contact name: ______________________________
Contact number: ______________________________
Contact e-mail: ______________________________

**Nominated contact for access to Scottish Water’s customer portal**

Licensed Providers may nominate one third-party (non-Licensed Provider) contact who will have access to view the application details through Scottish Water’s customer portal. If such access is required, please provide details below.

Company name: ______________________________
Contact name: ______________________________
Contact number: ______________________________
Contact e-mail: ______________________________

2. **Reason for the Request**

Please indicate the reason for the request and complete the relevant section below.

- [ ] Request for approval to carry out a Part 2/3 sewerage connection. Please complete section 3 and 4.

- [ ] Request for approval to carry out one or more Part 1 sewerage connection/s. Please complete section 5.
Request for Scottish Water to carry out a Track Inspection. Please provide the previous Scottish Water reference for the connection application ____________________ Please complete section 6

Change to an application for a Part 2/3 sewerage connection followed by one or more Part 1 sewerage connection/s. Please provide the previous Scottish Water reference for the connection application ____________________ Please complete section 7.1. Please note that where there is a material change to an application will be deemed as a new application.

Re-submission of an application to carry out a Part 2/3 sewerage connection followed by one or more Part 1 sewerage connection/s, following a rejected or lapsed application or completion of a DIA. Please provide the previous Scottish Water reference for the connection application ____________________ Please complete section 7.1.

Notice of completion of connection for a Part 2/3 connection followed by one or more Part 1 connection/s. Please provide the previous Scottish Water reference for the connection application ____________________ Please complete section 7.2.

3. Site Details:

3.1 Main Details

Please provide any Scottish Water DIA reference previously given to your site

Please provide any Scottish Water reference for a Part 2/3 connection application previously given to your site

Site or project name: ______________________________

Site address: ____________________________________

________________________________________
Are there any potential contaminated land issues relating to your site?

Yes □
No □

If yes, please indicate investigation measures adopted:

Additional information in relation to the site:

Type of development

<table>
<thead>
<tr>
<th></th>
<th>Number of Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial</td>
<td>□ _____________</td>
</tr>
<tr>
<td>Industrial</td>
<td>□ _____________</td>
</tr>
<tr>
<td>Area of Site (ha)</td>
<td>_____________</td>
</tr>
</tbody>
</table>

Planning Permission

Date detailed planning permission received: ________________
Local Authority Area: __________________________
Planning reference: __________________________

3.2 Land Owner and Development Details

3.2.1 Land Owner
3.2.2 Developer for the site
Name of company: __________________________________________
Contact name (if company name entered above): ______________________
Address: _______________________________________________________
______________________________________________________________
Postcode: ___________________
Phone number: ___________________
Mobile phone number: ___________________
Email address: ___________________
Preferred contact method: _______________________________________

3.2.3 Lead Contractor for the site
Name of company: __________________________________________
Contact name (if company name entered above): ______________________
Address: _______________________________________________________
______________________________________________________________
Postcode: ___________________
Phone number: ___________________
Mobile phone number: ___________________
Email address: ___________________
Preferred contact method: _______________________________________

3.2.4 Consultant / Agent for the site
Name of company: __________________________________________
Contact name (if company name entered above): ______________________
Address: _________________________________________________
_________________________________________________
Postcode: _____________________
Phone number: _____________________
Mobile phone number: _____________________
Email address: ___________________________
Preferred contact method: ___________________________

3.3 Phasing Information

Phasing information for installation of waste water infrastructure

(please show extent of each phase on the site plan. Continue on a separate sheet if necessary)

<table>
<thead>
<tr>
<th>Phase</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of plots</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plot numbers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date works due to start</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date sewer being installed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anticipated date for first occupation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anticipated date of phase completion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Part 2/3 connections</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Anticipated date for final completion __________________________

3.4 Building Water Supply

Have you applied for building water or has there been a previous application by a third party for this site? (please tick appropriate box)

Yes □

Provide reference from previous application (where available) __________________________

No □

Please submit Form J or provide confirmation below
If water from Scottish Water’s Network was and will not be used for building purposes, please confirm by ticking the box below and state the source of water to be used for building purposes:

☐

______________________________________________________________
______________________________________________________________
______________________________________________________________

By confirming you will not use Scottish Water’s Network for building water, you also confirm that the water you do use is obtained legally and is fit for purpose. You will be required to prove this to Scottish Water if requested to do so.

3.5 Health and Safety Details

3.5.1 Client Details:
Name: ____________________________
Phone Number: ____________________________
Mobile Phone Number: ____________________________
Email: ____________________________
Preferred contact method: ____________________________
Address: ____________________________
                                          ________________
                                          ________________
                                          ________________
Postcode: ____________________________

3.5.2 Planning Supervisor:
Name: ____________________________
Phone Number: ____________________________
Mobile Phone Number: ____________________________
Email: ____________________________
Preferred contact method: ____________________________
Address: ____________________________
                                          ________________
                                          ________________
                                          ________________
3.5.3 Principal Contractor:
Name: ____________________________
Phone Number: ____________________________
Mobile Phone Number: ____________________________
Email: ____________________________
Preferred contact method: ____________________________
Address:  


Postcode: ____________________________


4. Part 2/3 Connection Details

4.1 Contractor for the Sewerage Mains/Trunk Sewer/Waste Water System Connection ("Part 2/3")

Accredited Entity Name:  ____________________________
Name of company:  ____________________________
Contact name (if company name entered above):  ____________________________
SNIPEF registration reference (if available):  ____________________________
Address:  


Postcode: ____________________________
Phone number:  ____________________________
Mobile phone number:  ____________________________
Email address:  ____________________________
Preferred contact method:  ____________________________

4.2 Total demand for Part 2/3 Connection
Domestic purposes  □  Non-domestic purposes  □  
A mixture of both  □

What will the combined daily consumption be?  ________ (litres)
How many fire supplies do you need?_____________
Please indicate the number of staff/residents associated with your development? _____________

4.3 Proposed Size of Part 2/3 Connection
Please indicate the proposed size of the Part 2/3 connection in your design:

□  30mm (32mm outside diameter)
□  50mm (63mm outside diameter)
□  80mm (90mm outside diameter)
□  100mm (110/125mm outside diameter)
□  150mm (160/180mm outside diameter)
□  200mm (225mm outside diameter)
□  Other

If other please specify:  _______________________________________
_______________________________________

4.4 Surface Water
How are you dealing with surface water:

□  Private soak-away system within plot
□  Watercourse
□  Surface Water sewer
□  Combined sewer (only dealt with in exceptional circumstances)

Do you propose a gravity discharge to connect to an existing foul/combined sewer?
Yes  □
No    □

If No, please provide justification for your pump solution with this application. Please also specify the pump flow rate:  _____________ litre/second.
Please specify the type of Sustainable Urban Drainage System (SUDS) to be used by completing the following table:

<table>
<thead>
<tr>
<th>Type of SUDS</th>
<th>Discharge Rate (litre/second)</th>
<th>Storage Volume (m³)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4.5 Additional Information in Support of the Part 2/3 Connection Application

Please indicate what additional information is provided in support of this application and provide references where relevant. Please ensure all drawings comply with the applicable standards as set out in the current version of Sewers for Scotland.

- Site location plan (OS or GIS location _________________________)
- On-site design proposals (within property boundary)
- Off-site design proposals (from property boundary to the Scottish Water Network)
- Health and safety statement
- Local fire authority approval
- Roads adoption letter
- Drainage layout proposal
- Construction detail drawings
- Proposal longitudinal sections
- Soil Investigation (SI) report (if applicable)
- Written permission to carry out work on third party land (if applicable)
- Mechanical and Electrical (M&E) information (if applicable)
- Scottish Water DIA reference number _________________________
- Scottish Water reference for related building water application _____________________

5. Individual Premises to be Connected:

Number of premises to be connected ___________

5.1 Individual Premises Details
Please provide details for each individual premises to be connected. Continue on a separate sheet if necessary.

**Phase of development**

**Anticipated date of public sewer connection:**

**Address of new premises**

Plot/Unit ______________________________

Building Number ______________________________

Building Name ______________________________

Site ______________________________

Street ______________________________

Town ______________________________

Postcode (or area code) ______________________________

Please provide the unique property reference number(s) requested below:

- SAA Reference Number: _____________________________
- UPRN: _____________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Missing entry from the SAA
- Fish farms, fishing, and sporting rights
- Agricultural land and buildings
- Property is multi-tenancy
- Infrastructure Project

Other (please provide details) ______________________________

Where the UPRN is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Agricultural land and buildings
- Property is multi-tenancy
- Infrastructure Project

Other (please provide details) ______________________________

Unique property reference number (if available): ______________________________

---

15 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
**Type of connection proposed:**

<table>
<thead>
<tr>
<th>Foul</th>
<th>Surface water</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of connections:

Diameter of connection:

Type of connection (Manhole, Saddle, Branch, etc.):

Please specify pipe material of your proposed connection:

Anticipated annual water consumption from the site in ____________ m$^3$ cubic metres

**Owner of the premises**

Name or company name: ________________________________

Address: _________________________________________

Postcode: _________________________________________

Is the premises intended to be multi-tenancy?

No  ☐

Yes  ☐

Don’t Know  ☐ If yes, please provide any additional information, such as number of units and unit addresses.

________________________________________________________________________

________________________________________________________________________

Type of premises (please tick appropriate box)

---

*Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.*
<table>
<thead>
<tr>
<th>Type of Discharge</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Hospital</td>
</tr>
<tr>
<td>If other, please specify:</td>
<td>__________________________________________</td>
</tr>
</tbody>
</table>

**Type of discharge:**

| Domestic use only (e.g. office): | ☐ |
| Trade (e.g. factory): | ☐ |

If Trade, please specify: __________________________________________

Additional information in relation to the connection:

**Will there be a discharge of Trade Effluent from the premises?**

| Yes | ☐ |
| No | ☐ |

If yes, please provide Scottish Water’s Trade Effluent consent application reference (where available)  __________________________________

**5.2 Contractor for individual Premises (“Part 1”) Connection**

Please provide details of the Accredited Entity who will be carrying out the connection.

| Accredited Entity Name: | __________________________________________ |
| Name of company: | __________________________________________ |
| Contact name (if company name entered above): | ____________________ |
SNIEF registration reference (if available): _______________________
Address: _________________________________________________
_________________________________________________
Postcode:  _____________________
Phone number:  _____________________
Mobile phone number: _____________________
Email address: ___________________________
Preferred contact method:  _______________________________________

5.3 Special Requirements

In making this application Scottish Water will by default create a SPID pair with all relevant Water
Services attached. Do you wish to continue with this default position?
☐ Yes, a SPID pair is required
☐ No, a SPID pair is not required

If a SPID pair is not required, please tick the appropriate box below and provide relevant
information:

☐ Only a Sewerage SPID is required because an existing water connection (and SPID)
is already in place, this should become a SPID pair.

Please provide the existing SPID reference:  ___________________________

Where no SPID is available, please provide any further information to assist in cross-referencing
the application, e.g. Scottish Water Service Request number or any other application reference,
date of application, Licensed Provider reference etc.

☐ Only a Sewerage SPID is required because the Non-Household Customer is using
another Licensed Provider for their Water SPID.

☐ Only a Sewerage SPID is required because the Non-Household Customer will only
use Sewerage Services.

☐ Other (please explain below):
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Please provide any additional information relating to the application as appropriate:
5.4 Drawings/Calculations Provided with this Form

Please indicate what additional information is provided in support of this application and provide references where relevant. Please ensure all drawings comply with the applicable standards as set out in the current version of Sewers for Scotland.

- Site location plan (OS or GIS location _________________________)
- Scottish Water reference for associated water application ______________________
- or
- information relating to the provision of water to the premises
- On-site design proposals (within property boundary)
- Off-site design proposals (from property boundary to the Scottish Water Network)
- Flow control device calculations (if applicable)
- Soil Investigation (SI) report (if applicable)
- Scottish Water DIA reference number _________________________
- Scottish Water reference for related building water application _________________________

6. Request for Track Inspection/s

Please indicate the type of Track Inspection required:

- Track Inspection for Part 2/3 connection only
- Track Inspection/s for Part 1 connection/s only Please indicate the number of Part 1 connections ready for Track Inspection _________
- Track Inspection/s for both Part 2/3 and Part 1 connection/s Please indicate the number of Part 1 connections ready for Track Inspection _________

Please provide the following details for all Track Inspections requested

Connection ID _______________

Contact for Track Inspection
Name ________________________________
Company: ________________________________
Job title: ________________________________
Telephone number: ________________________________
Mobile telephone number: ________________________________
Email: ________________________________
Preferred contact method: ________________________________
Preferred date(s) for Track Inspection: ________________________________
Proposed date of connection: ________________________________

**Additional Information for Part 1 Connection/s**

Where available, please provide the most complete postal address information for the property. This address will be used to create the SPID address.

Occupier (anticipated): ________________________________
Building number: ________________________________
Building name: ________________________________
Address line 1: ________________________________
Address line 2: ________________________________
Address line 3: ________________________________
Town: ________________________________
Postcode: ________________________________

Please provide the unique property reference number(s) requested below:

SAA Reference Number: ________________________________
UPRN: ________________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Missing entry from the SAA
- Fish farms, fishing, and sporting rights
- Agricultural land, buildings and troughs
- Property is multi-tenancy

Where the UPRN is not available, please provide a valid supporting reason(s) below:

The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
7. **Change/Resubmission of Application Details**

Please indicate where changes to the previous application form are required by ticking the appropriate box below, and provide the updated details in the relevant section. Please tick all boxes that are appropriate. Where there is a material change to an application it will be deemed as a new application.

- □ Reason for Request
- □ Site Details
- □ Part 2/3 Connection Details
- □ Individual Premises Connection Details
- □ Request for Track Inspection
- □ Confirmation of Connection

Please provide any additional information in relation to the change.

______________________________________________________________
______________________________________________________________
______________________________________________________________

8. **Confirmation of Completion of Connection/s**

This section should only be completed where notice of intent to carry out connection works using an Accredited Entity has already been provided to Scottish Water.

Please indicate the type of connection which has been completed and provide details in the relevant section:

- □ Part 2/3 connection  Please complete section 8.2.1

---

Unique property reference number (if available): 18

---

Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
8.2.1 Part 2/3 Connection Completion Details

Please confirm the date the connection was carried out ____________________________

Please confirm the contractor who carried out the connection:
Name of company: __________________________________________
Contact name (if company name entered above): ______________________
Address: _________________________________________________
_________________________________________________
Postcode:  _____________________
Phone number:  _____________________
Mobile phone number: _____________________
Email address: ___________________________
Preferred contact method: _______________________________________

☐ Please provide "as built" drawings with this form.
☐ Please provide the Technical Approval reference number ______________________

8.2.2 Part 1 Connection Completion Details

Please complete these details upon completion of each Part 1 connection at the site.

Please confirm the number of completed Part 1 connections to be updated    _____

Connection ID _______________
Supply Point ID (SPID)  ________________________________

Are all the details of the connection the same as those provided in section 5.1 of this form?
☐ Yes
☐ No

Where details have changed please update the relevant detail in section 5.1 and resubmit the form.

Please confirm the actual date of connection  ____________________________
Please confirm the contractor who carried out the connection:

Accredited Entity ID: __________________________________________
Name of company: __________________________________________

Confirmation of Address

Please provide the postal address details below. Please provide as much detail as possible.

Supply Point ID (SPID) ________________________________

Unique property reference number (if available): 26 ________________________________

Company Name: ________________________________
Building Number: ________________________________
Building Name: ________________________________
Address line 1: ________________________________
Address line 2: ________________________________
Address line 3: ________________________________
Town: ________________________________
Postcode: ________________________________

Please provide the unique property reference number(s) requested below 20 ________________________________

SAA Reference Number: ________________________________

UPRN: ________________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

Property not yet rated □□
Missing entry from the SAA □□
Agricultural land, buildings and troughs □□
Fish farms, fishing, and sporting rights □□
Fish camps, fishing, and sporting rights □□
Parks, Allotments and Sports Ground □□

Where the UPRN is not available, please provide a valid supporting reason(s) below:

Missing entry from the OSG □□
Fish farms, fishing, and sporting rights □□
Property is multi-tenancy □□
Infrastructure Project □□
Agricultural including troughs □□

26 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.

20 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
Property is multi-tenancy □ Not yet issued by planning □

Other (please provide details) ____________________________
_____________________________________
_____________________________________

Owner of the premises

Name or company name _____________________________________

Address _____________________________________
_____________________________________

Postcode __________________________

Is the premises intended to be multi-tenancy?

Yes □
No □
Don't Know □

If yes, please provide any additional information, such as number of units and unit addresses.
________________________________________________________________________
________________________________________________________________________

☐ Please provide “as built” drawings with this form.
☐ Please provide the Technical Approval reference number __________________________

9. Declaration:

9.1 Declaration upon application for approval to connect to the Public Sewerage System

I/We hereby make application to Scottish Water for the provision of waste water infrastructure to serve the above development.

I/We undertake to abide by the terms and conditions set out in the current version of Sewers for Scotland.

I/We understand that sewer construction work may not commence until formal approval is given by Scottish Water.

I/We understand that any alterations made to this application must be declared to Scottish Water.

I/We have filled in all the relevant sections of this form. The details I/We have given with this application are accurate.
I/We have read and understood the supporting guidance notes.
I/We have enclosed all the necessary supporting documentation.

9.2 Declaration upon application for Track Inspection
I/We declare that the connection is ready for Track Inspection.
I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

9.3 Declaration upon completion of connection to the Public Sewerage System
I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.
I/We have enclosed all the necessary supporting documentation, including “as built” drawings.

Your details:

Signature: ______________________________  Date: ______________

Full name (in capitals): ______________________________________________

Role in the company or job title: ______________________________
Form J

Application for a Water and/or Sewerage Connection for Building Work/Site Accommodation from a Licensed Provider

This form sets out the details required to request an offer of connection to the Network from Scottish Water for the supply of water and/or sewerage services for the purpose of building work and/or site accommodation. The form may be submitted in conjunction with an application for a permanent connection to the Scottish Water Network (using forms A/B/C/D) or as an independent application. The form is divided into sections, as follows:

1) Notes on provision of water for Building Work purposes
2) Licensed Provider Information
3) Site where water for Building Work is required
4) Reason for the Request
5) Type of Connection required
6) Water Source Information
7) Building Water Supply Information – Metered Supply
8) Building Water Supply Information – Unmeasured (non-metered) Supply
9) Work to be undertaken
10) Additional Information
11) Accredited Entity Details
12) Request for Track Inspection
13) Confirmation of Completion of Building Water/Site Accommodation Connection
14) Request for Scottish Water to Disconnect Building Water/Site Accommodation supply
15) Notice of Disconnection of Building Water/Site Accommodation supply to be carried out by an Accredited Entity
16) Confirmation of Disconnection of Building Water/Site Accommodation supply by an Accredited Entity
17) Declaration

The relevant sections of the form should be completed and submitted to Scottish Water in the following stages:

1. Application for approval for a connection to the Scottish Water Network for Building Work and/or Site Accommodation – sections 2-11;
2. providing a minimum of 5 Business Days advance notice, a request for Track Inspection – section 12;
3. only where a connection has been carried out by an Accredited Entity following instruction from the Licensed Provider, Confirmation of Completion of Temporary Connection – section 13;
4. on cessation of the requirement for supply, a request for Scottish Water to disconnect – section 14 – or notification of the intention to disconnect a metered supply using an Accredited Entity – section 15:
5. only where a disconnection has been carried out by an Accredited Entity following instruction from the Licensed Provider, Confirmation of disconnection of Temporary supply – section 16

The Licensed Provider must complete a declaration (section 17) at each stage of the application. The form should also be resubmitted where any details previously provided have been updated. Mandatory information will vary depending on the stage of the process and who is undertaking the work.

It should be noted that this is the Operational Code version of the form; it may be presented in alternative formats as appropriate (such as an internet-based format); the content will be as presented here.

1. Notes on provision of water for Building Work purposes

Charges for water used on building work will be charged in accordance with the Scottish Water Wholesale Charges Scheme.

Where the site is already provided with a meter, water for Building Work purposes may be charged at metered water rates in accordance with the Scottish Water Wholesale Charges Scheme. Where there is no existing meter on the site, a meter may be installed or otherwise the appropriate unmeasured charge in the Scottish Water Wholesale Charges Scheme will apply.

Where a temporary communication pipe is installed solely for a supply for Building Work and is not required to be a permanent supply, the cost of removing the pipe, valve, branch and any other fittings and of restoring the surface of the road and any other necessary work will be charged to the customer.

2. Licensed Provider Information

Licensed Provider’s own Reference: ____________________
Licensed Provider: ____________________________
Licensed Provider ID:   _________
Contact name:    _____________________________
Contact number:   _____________________________
Contact e-mail:    _____________________________

Nominated contact for access to Scottish Water’s customer portal
Licensed Providers may nominate one third-party (non-Licensed Provider) contact who will have access to view the application details through Scottish Water’s customer portal. If such access is required, please provide details below.
Company name: ______________________________
Contact name: ______________________________
Contact number: ______________________________
Contact e-mail: ______________________________

3.  Site where water for Building Work is required
Please supply one or more of three location methods listed below

Postal Address (if available, or site address)
Plot/Unit ______________________________
Building Number ______________________________
Building Name ______________________________
Site ______________________________
Street ______________________________
Town ______________________________
Postcode (or area code) ______________________________

Please provide the unique property reference number(s) requested below

<table>
<thead>
<tr>
<th>SAA Reference Number:</th>
<th>UPRN:</th>
</tr>
</thead>
</table>

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:
Where the UPRN is not available, please provide a valid supporting reason(s) below:

21 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website - www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
<table>
<thead>
<tr>
<th>reason(s) below:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Property not yet rated</td>
<td>☐</td>
</tr>
<tr>
<td>Missing entry from the OSG</td>
<td>☐</td>
</tr>
<tr>
<td>Agricultural land, buildings and troughs</td>
<td>☐</td>
</tr>
<tr>
<td>Fish farms, fishing, and sporting rights</td>
<td>☐</td>
</tr>
<tr>
<td>Property is multi-tenancy</td>
<td>☐</td>
</tr>
<tr>
<td>Infrastructure Project</td>
<td>☐</td>
</tr>
<tr>
<td>Parks, Allotments and Sports Ground</td>
<td>☐</td>
</tr>
<tr>
<td>Agricultural including troughs</td>
<td>☐</td>
</tr>
<tr>
<td>Property is multi-tenancy</td>
<td>☐</td>
</tr>
<tr>
<td>Building Water</td>
<td>☐</td>
</tr>
<tr>
<td>Building Water</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other (please provide details)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Unique property reference number (if available): 22

Ordnance Survey Grid Reference
GIS Easting and Northing (x, y, coordinates)

Scottish Water Reference number associated with this development.

What was the previous use of this site:

- Greenfield or agriculture ☐
- Housing ☐
- Industry ☐
- Landfill ☐
- Other ☐

If other please specify:

Planning reference:
Date:
Local Authority Area:

4. **Reason for the Request**

Please indicate the reason for the request and complete the relevant section below.

---

**Note:** Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.
5. Type of Connection required

☐ Request for Scottish Water to carry out a connection to the Network for Building Water/Site Accommodation. Please complete sections 3-10

☐ Request for the Licensed Provider to carry out a connection to the Network for Building Water/Site Accommodation. Please complete sections 3-11

☐ Request for Scottish Water to carry out a Track Inspection, pressure testing or bacteriological sampling. Please provide the previous Scottish Water reference for the connection application ________________. Please complete section 12.

☐ Confirmation of completion of a connection to the Network for Building Water/Site Accommodation. Please provide the previous Scottish Water reference for the connection application ________________. Please complete section 13.

☐ Request for Scottish Water to disconnect the Building Water/Site Accommodation supply from the Network. Please provide the previous Scottish Water reference for the connection application ________________. Please complete section 14.

☐ Notice of disconnection of the Building Water/Site Accommodation supply from the Network to be carried out by an Accredited Entity. Please provide the previous Scottish Water reference for the connection application ________________. Please complete section 15.

☐ Confirmation of completion of a disconnection of the Building Water/Site Accommodation supply from the Network carried out by an Accredited Entity. Please provide the previous Scottish Water reference for the connection application ________________. Please complete section 16.
Please advise of the types of temporary connections that you require:

**Building Water:**  Yes □  No □

**Site Accommodation:**  Yes □  No □

For Site Accommodation, please specify required services below.

- Water Only: □
- Sewerage Only: □
- Both: □

Will there be a discharge of Trade Effluent from the premises?

- Yes □
- No □

If yes, please provide Scottish Water’s Trade Effluent consent application reference (where available)  __________________________________

Do you require water to be supplied at three storeys or above (or equivalent height)?

- Yes □
- No □

Additional information in relation to the connection:

___________________________________________
___________________________________________

Do you intend to use a Scottish Water revenue meter (new or existing) for the Building Water/Site Accommodation supply?

- Yes  (please complete section 7 of this form)
- No   (please complete section 8 of this form)

**6 Water Source Information**

Are you intending to use an existing supply?  Yes □  No □

If you intend to use an existing supply please detail where and what the supply is below.

___________________________________________
___________________________________________
If you are intending to use a standpipe, please provide your Scottish Water Standpipe reference number. ________________________

If a temporary connection is required, please provide a location plan, design drawings, etc.

7 Building Water Supply Information – Metered Supply

Please complete section 7.1 where a new meter is to be installed for the Building Water/Site Accommodation supply, or section 7.2 where an existing metered supply is to be used.

7.1 New Meter Installation

Where a meter is to be installed, please fill in the Appendix A – Meter Size Data Assessment Sheet and indicate the size of meter required:

15mm  □  20mm  □  25mm  □
30mm  □  40mm  □  50mm  □
80mm  □  100mm  □  150mm  □
200mm □  250mm  □  300mm  □
80 - 20mm □  100 - 20mm □  Other  □

If other please specify: _____________________________________

Type of meter to be installed (from the Scottish Water Meter Menu)
Standard  □  Non-standard  □
Scottish Water Meter Menu reference ______________________________

Proposed date of installation ________________________________

7.2 Existing Metered Supply

If an existing metered supply is to be used, please provide details of all meters that will be used for building water/site accommodation.

<table>
<thead>
<tr>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
<th>Meter 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meter make:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of commercial units ___________________

Description of Traditional Building work if applicable ________________

Description of Non-traditional Building work if applicable ________________

Description of Modernisation / Rehabilitation if applicable ________________

Estimated cost of building works £___________________

Value of ready mixed concrete used in construction £___________________

9. Work to be undertaken

9.1 Building Water

Date Building Water is required: ________________

How long do you require a Building Water supply: ________________ (weeks)

Size of connection required: □ 25mm □ 32mm

□ Other (please specify) ______

Number of connections required: ________________

If the supply is temporary then a disconnection fee will apply; is the supply temporary or permanent ________________

9.2 Site Accommodation – Water

Date temporary water supply is required: ________________
How long do you require a temporary water supply: ___________________ (weeks)
Number of people that will use the site accommodation ___________________
Number of weeks that people will be on site during the building water phase _______________

Please indicate all the facilities at the site accommodation:

☐ Toilets       ☐ Showers
☐ Canteen      ☐ Other (please specify) ________________________

Size of connection required:    ☐ 25mm       ☐ 32mm
☐ Other (please specify) _______

Number of connections required: ______________________

Size of meter required:    ☐ 15mm       ☐ 20mm       ☐ 25mm
☐ Other (please specify) _______

If the supply is temporary then a disconnection fee will apply; is the supply temporary or permanent _______________

9.3 Site Accommodation – Sewerage

Date Sewerage connection is required: ______________________
How long do you require a temporary Sewerage connection: ______________________
Number of people that will use the site accommodation ___________________
Number of weeks that people will be on site during the building water phase _______________

Please indicate all the facilities at the site accommodation:

☐ Toilets       ☐ Showers
☐ Canteen      ☐ Other (please specify) ________________________

<table>
<thead>
<tr>
<th>Foul</th>
<th>Surface Water</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of connections: ______________________

Diameter of connections: ______________________

Type of connections: ______________________

10 Additional Information

Please provide any other relevant information that may assist in the application:

-
11. Accredited Entity Details
Where the temporary connection will be made an Accredited Entity following instruction from the Licensed Provider, please provide details of the Accredited Entity who will be carrying out the work.

11.1 Accredited Entity for Temporary Connection

Accredited Entity (full name of company): _______________________________________
Contact name:    _______________________________________
Phone number:  _______________________________________
Mobile phone number: _______________________________________
Email address:  _______________________________________
Preferred contact method:  _______________________________________

11.2 Accredited Entity for the installation of the Scottish Water revenue meter at the premises

Accredited Entity (full name of company): _______________________________________
Contact name:    _______________________________________
Phone number:  _______________________________________
Mobile phone number: _______________________________________
Email address:  _______________________________________
Preferred contact method:  _______________________________________

12. Request for Track Inspection
Please provide a suitable contact for the Track inspection
Name    ________________________________
Company   ________________________________
Job title    ________________________________
Telephone number   ________________________________
Mobile telephone number   ________________________________
Email    ________________________________
Preferred contact method: _______________________________________

Preferred date(s) for Track Inspection __________________________
Proposed date of connection __________________________

Where available, please provide the most complete postal address information for the property. This address will be used to create the SPID address.

Supply Point ID (SPID) ________________________________

Unique property reference number (if available): 23 _____________________________

Company Name: ________________________________
Building Number: ________________________________
Building Name: ________________________________
Address line 1: ________________________________
Address line 2: ________________________________
Address line 3: ________________________________
Town: ________________________________
Postcode: ________________________________

Please provide the unique property reference number(s) requested below 24

SAA Reference Number: ________________  UPRN: ________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the SAA
- Agricultural land, buildings and troughs
- Fish farms, fishing, and sporting rights
- Parks, Allotments and Sports Ground
- Infrastructure Project
- Property is multi-tenancy
- Agricultural including troughs

Please provide the unique property reference number(s) requested below 24

Notes:

23 Unique property reference number may be obtained from the SAA (Scottish Assessors Association) website – www.saa.gov.uk – or alternative sources as agreed with Scottish Water.

24 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN availability will vary depending on the specific council planning department and should be available at building warrant granted stage and can also be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
13. Confirmation of Completion of Building Water/Site Accommodation Connection

Are all the details of the connection the same as those provided in this form?

☐ Yes
☐ No

Where details have changed please update the relevant details and resubmit the form.

Please confirm the date when the connection was carried out: ______________________________

Supply Point ID (SPID) ______________________________

Please confirm the contractor who carried out the connection:

Accredited Entity (full name of company): _______________________________________

Details of Meter Installed

Where a Scottish Water revenue meter has been installed, please provide the details below.

Meter serial number: ______________________________

Meter type: ______________________________

Meter make: ______________________________

Meter size: ______________________________

No. of Dials: ______________________________

Date of meter installation ______________________________

Opening Meter Read ______________________________

Photograph of meter included: ☐

Installer details:

Accredited Entity (full name of company): ______________________________
14. Request for Scottish Water to Disconnect Building Water/Site Accommodation supply

Where the requirement for the temporary supply has ceased, please indicate by ticking the box below and resubmitting the form to Scottish Water.

Please note that Scottish Water will disconnect the supply within 10 Business Days of receipt of this instruction. If you wish for the disconnection to take place on a particular date please indicate by ticking the box below and provide the preferred date of disconnection.

Preferred date of disconnection

15. Notice of Disconnection of Building Water/Site Accommodation supply to be carried out by an Accredited Entity

Where the requirement for the temporary supply has ceased and will be disconnected by an Accredited Entity following instruction from the Licensed Provider, please indicate by ticking the box below and resubmitting the form to Scottish Water.

Accredited Entity (full name of company):

Contact name:

Phone number:

Mobile phone number:

Email address:

Preferred contact method:

Proposed date of disconnection
16. Confirmation of Disconnection of Building Water/Site Accommodation supply by an Accredited Entity

Please confirm the date of the disconnection ______________________________

Supply Point ID (SPID) ________________________________

Please confirm the contractor who carried out the disconnection:
Accredited Entity (full name of company): ________________________________

Meter Details

Please provide details of the Scottish Water revenue meter that has been removed below.

Meter serial number: ________________________________
Meter type: ________________________________
Meter make: ________________________________
Meter size: ________________________________
No. of Dials: ________________________________

Date of meter removal ________________________________
Final Meter Read ________________________________

Photograph of meter included: ☐

Remover details:
Accredited Entity (full name of company): ________________________________

17 Declaration

17.1 Declaration upon application for approval to connect to the Scottish Water Network for a supply of Building Water and/or Site Accommodation

I/we hereby make application to Scottish Water for a supply of Building Water and/or Site Accommodation as detailed above; the details given are correct.

I/we undertake to abide by the terms and conditions of current Scottish Water Byelaws on date of application.

I/we understand that any alterations made to this application must be declared to Scottish Water.
I/We have filled in all the relevant sections of this form.
I/We have read and understood the supporting guidance notes.
I/We have enclosed all the necessary documentation.

17.2 Declaration upon application for Track Inspection
I/We declare that the connection is ready for Track Inspection
I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

17.3 Declaration upon completion of connection to or disconnection from the Scottish Water Network for a supply of Building Water and/or Site Accommodation
I/We have enclosed all the necessary supporting documentation, including meter details as appropriate.

17.4 Declaration upon Request to Disconnect the Temporary Supply
I/We have filled in all the relevant sections of this form. The details I/we have given with this application are accurate.

Signature: ______________________________  Date: ______________
Full name (in capitals): ______________________________________________
Role in the company or job title: ________________________________________
A. Appendix – Meter Size Data Assessment Sheet:

Proposed number of meters: __________

### 1. Site Information

<table>
<thead>
<tr>
<th>Details of all available data items should be completed.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Size of any existing meters or</strong></td>
</tr>
<tr>
<td>“NEW” for new meters:</td>
</tr>
<tr>
<td><strong>Any existing meter serial numbers:</strong></td>
</tr>
<tr>
<td><strong>Supply pressure (Bar) if known:</strong></td>
</tr>
<tr>
<td><strong>Diameter of incoming pipe into</strong></td>
</tr>
<tr>
<td>building/premises (mm):</td>
</tr>
<tr>
<td><strong>Fire supply (Y/N):</strong></td>
</tr>
<tr>
<td>If YES, please complete section 4 – Fire Supplies</td>
</tr>
<tr>
<td><strong>Contaminated land (Y/N):</strong></td>
</tr>
<tr>
<td><strong>Operational time period (hours):</strong></td>
</tr>
<tr>
<td>Please select one of the following: 8; 8-12; 12</td>
</tr>
<tr>
<td>If no time period is selected, 24 hours will be used as</td>
</tr>
<tr>
<td>the default</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 2. Number of Water Fittings

Please provide details of the number of water fittings (as listed) and indicate whether they are fed from the mains or from a storage tank. If no information is available please complete section 3 – Flowrate.

<table>
<thead>
<tr>
<th>Storage tank supply pipe size (mm):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mains</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WC flushing cistern:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domestic sized wash basin:</td>
</tr>
<tr>
<td>Commercial sized wash basin:</td>
</tr>
</tbody>
</table>
3. Flowrate

Where no information is available for the number of water fittings, please complete either section 3.1 or 3.2.

<table>
<thead>
<tr>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 3.1 From Logging Data
Please provide details of all three flowrates requested.

- **Minimum (l/sec):**
- **Maximum (l/sec):**
- **Typical (l/sec):**

### 3.2 Estimate of Flowrate
Please provide details for the daily water requirement.

- **Daily requirement (l/day):**

---

4. Fire Supplies

Please provide details for the number of fire supplies and their estimated flowrates.
<table>
<thead>
<tr>
<th></th>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of fire hydrants:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estimated flowrate (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of fire hoses:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estimated flowrate (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of sprinkler system heads:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estimated flowrate (l/sec):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Meter Requirements

Please indicate whether there is power available at the site if a meter that requires power is being selected from the meter menu.

<table>
<thead>
<tr>
<th></th>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
<th>Meter 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Power available (Y/N):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
All fields on the form are mandatory unless otherwise indicated.

Form M

Gap Site Supply Point Request Form
For Use by Licensed Providers

Please note that sections 1, 2, 6 and 7 must be completed by Licensed Providers and sections 3 – 5 should be completed where possible.

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

2. Premises Details:
   SAA property reference number25: ________________________________
   Company name: ________________________________
   Banner Name26: ________________________________
   Building number: ________________________________
   Building name: ________________________________
   Address line 1: ________________________________
   Address line 2: ________________________________
   Address line 3: ________________________________
   Town: ________________________________
   Postcode: ________________________________

Please provide the unique property reference number(s) requested below27.

25 SAA (Scottish Assessors Association) property reference number can be obtained from the Scottish Assessor’s website – www.saa.gov.uk
26 Banner name is the trading identity associated directly with the property, e.g., the brand name of a fast food restaurant and not the franchisee’s name.
Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Agricultural land, buildings and troughs
- Fish farms, fishing, and sporting rights
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Parks, Allotments and Sports Ground
- Agricultural including troughs
- Property is multi-tenancy
- Infrastructure Project
- Not yet issued by planning
- Other (please provide details) ______________

Where the UPRN is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Agricultural land, buildings and troughs
- Fish farms, fishing, and sporting rights
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Parks, Allotments and Sports Ground
- Agricultural including troughs
- Property is multi-tenancy
- Infrastructure Project
- Not yet issued by planning
- Other (please provide details) ______________

Contact name at site:

Contact number at site:

Rateable Value of property:

Was the Gap Site Supply Point identified via the CMA Portal?:
- Yes
- No

If Yes please provide the UARN:

27 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN can be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.

28 Licensed Providers should endeavour to provide the name and phone number of a contact for manned customer premises. For unmanned customer premises, Licensed Providers should endeavour to provide the name and phone number of an individual who can arrange access to the site if needed.
3. **Services at the premises:**

Please indicate all services provided at the premises:

### 3.1 Water Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water Connection</td>
<td>☐</td>
</tr>
<tr>
<td>Metered Water</td>
<td>☐</td>
</tr>
<tr>
<td>Number of Services to Caravans</td>
<td></td>
</tr>
<tr>
<td>Number of Troughs and Drinking Bowl Connections</td>
<td></td>
</tr>
<tr>
<td>Number of Outside Taps</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
</tr>
</tbody>
</table>

**If other, please specify:** ______________________________

If water services to the property are provided through a Scottish Water revenue meter, please provide meter details below:

<table>
<thead>
<tr>
<th>Meter</th>
<th>Meter type</th>
<th>Meter make</th>
<th>Meter size</th>
<th>Number of Dials</th>
<th>Meter serial number(s)</th>
<th>Meter reading</th>
<th>Date of reading</th>
<th>Northing</th>
<th>Easting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meter 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meter 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meter 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>x,y coordinates:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northing:</td>
</tr>
<tr>
<td>Easting:</td>
</tr>
</tbody>
</table>

**Meter location:** ____________________________________________________

________________________________ ____________________

________________________________ ____________________
3.2 Sewerage Services

Sewerage Connection: □
Roads Drainage: □
Property Drainage: □
Metered Sewerage: □

Is there a discharge of Trade Effluent from the premises to the public sewer?
Yes □
No □

4. Supply Point (SPID) Request:

Please indicate the services for which a Supply Point ID (SPID) is required:

Water SPID required □
Sewerage SPID required □
Both Water and Sewerage SPID required □

Where only Water or only Sewerage SPID is required because a Water/Sewerage SPID already exists at the site, please provide the existing SPID at the site: ______________________

Otherwise, please state the reason for only a single service request, e.g. ‘septic tank’:
__________________________________________________________________________

5. Additional Information:

Please provide any additional information that may be useful in identifying the property. For example, GIS co-ordinates or a map of the site:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
6. **Consent to Contact Non-Household Customer:**
Scottish Water may wish to contact the Non-Household Customer to arrange a visit to the premises. 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: ☐

7. **Declaration on behalf of the Licensed Provider:**
We hereby acknowledge that we have undertaken all reasonable endeavours to complete this form, to confirm the status of Water Services and/or Sewerage Services at this site and that following these investigations we believe this is a Gap Site as defined under the Market Code. The information provided in this form is correct to the best of our knowledge and up to date at the date of submission.

Name: _______________________________
Job Title: _______________________________
Signature: _______________________________
Date: _______________________________
Supply Point Deregistration Request Form
For Use by Licensed Providers

Please note that sections 1, 2, 3, 4, 12 and 14 must be completed by Licensed Providers and sections 5 – 11 should be completed where appropriate. Mandatory fields are illustrated by a grey background.

1. Licensed Provider Details:

| Licensed Provider: | ________________________________ |
| Licensed Provider's own Reference: | ________________________________ |
| Licensed Provider ID: | ________________________________ |
| Contact name: | ________________________________ |
| Contact number: | ________________________________ |
| Contact e-mail: | ________________________________ |

2. Premises Details:

| SAA property reference number: | ________________________________ |
| Company Name: | ________________________________ |
| Building Number: | ________________________________ |
| Building Name: | ________________________________ |
| Address line 1: | ________________________________ |
| Address line 2: | ________________________________ |
| Address line 3: | ________________________________ |
| Town: | ________________________________ |
| Postcode: | ________________________________ |
| Contact name at site (if available): | ________________________________ |

*SAA (Scottish Assessors Association) property reference number can be obtained from the Scottish Assessor’s website – www.saa.gov.uk*
Contact number at site (if available): ________________________________

Please provide the unique property reference number(s) requested below:

SAA Reference Number: ____________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the SAA
- Agricultural land, buildings and troughs
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Infrastructure Project
- Parks, Allotments and Sports Ground
- Agricultural including troughs
- Property is multi-tenancy
- Not yet issued by planning
- Other (please provide details) ______________

UPRN: ____________________________

Where the UPRN is not available, please provide a valid supporting reason(s) below:

- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Infrastructure Project
- Agricultural including troughs
- Property is multi-tenancy
- Not yet issued by planning
- Other (please provide details) ______________

3. Services at the premises to be deregistered:

3.1 Supply Point (SPID)

Water SPID: ________________________________

Water SPID connection date: ________________________________

Please tick here if Water SPID is to be deregistered: □

Date deregistration should be effective from: ________________________________

Is the Water SPID currently in NAPS □ YES □ NO

Sewerage SPID: ________________________________

Sewerage SPID connection date: ________________________________

30 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN can be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.

31 If multiple SPIDs are to be deregistered in relation to a bulk (landlord) meter, please enter the details of all SPIDs to be deregistered in section 10.4; this section can be left blank.
Please tick here if Sewerage SPID is to be deregistered:  

Date deregistration should be effective from: ________________________________

Is the Sewerage SPID currently in NAPS  
☐ YES  ☐ NO

Please tick here if only Property Drainage is to be removed:  

Date Service Elements should be removed from: ________________________________

Current SPID status at the CMA (Vacant/Occupied/Long Term Vacant etc.):
________________________________

Is there a discharge of Trade Effluent from the premises to the public sewer?
Yes ☐
No ☐

If yes, please provide the Discharge Point ID (DPID): ________________________________

3.2 Meter Details
Please provide details of all revenue meters at the SPID to be deregistered:

<table>
<thead>
<tr>
<th>Meter ID:</th>
<th>Meter 1</th>
<th>Meter 2</th>
<th>Meter 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical meter size:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
<tr>
<td>Number of Dials:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
<tr>
<td>Meter serial number:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
<tr>
<td>Date of meter installation:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
<tr>
<td>Most recent meter reading:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
<tr>
<td>Date of reading:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
<tr>
<td>x,y coordinates:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Northing:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
<tr>
<td>Easting:</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
</tr>
</tbody>
</table>

Meter 1 location:  ____________________________________________________
Meter 2 location:  ________________________________ ____________________
Meter 3 location:  ________________________________ ____________________
4. Reason for the Request:

4.1 Reason for deregistration

Please indicate the reason for the request and complete the relevant section below:

- [ ] Demolished: property has been demolished and no longer exists. (Please complete section 5)

- [ ] Domestic (change of use): property is no longer trading as a business and is domestic only. (Please complete section 6)

- [ ] Duplicate SPID: more than 1 SPID has been identified for the same Supply Point. (Please complete section 7)

- [ ] No Water Connection: property is not connected to the Public Water Supply System. (Please complete section 8)

- [ ] No Sewerage Connection: property is not connected to the Public Sewerage System. (Please complete section 9)

- [ ] No Property Drainage: no rainwater from the property drains to the Public Sewerage System. (Please complete section 9.2)

- [ ] Bulk (landlord) Meter: services to the property are supplied through a bulk/parent meter/landlord. (Please complete section 10)

- [ ] Merged Property: a formerly individual property has merged with a neighbouring property and is supplied through a different SPID. (Please complete section 11)

- [ ] Other

If other, please specify:

______________________________________________________________________________
4.2 Service request history

Please provide any relevant Scottish Water service request reference numbers in relation to the request;

__________________  __________________  __________________

4.3 Licensed Provider Summary

Please provide a summary of your findings and recommended actions; for example, "property demolished 21 September 2009 – deregister water and drainage SPID":

____________________________________________________________________________
____________________________________________________________________________

Please complete the relevant section/s below.

5. Demolished:

Please provide the effective date of demolition:

__________________

Please provide a demolition certificate in support of your request where available.

6. Domestic (change of use):

Please provide the effective date for the change of use:

__________________

Please provide the Council Tax reference number for the property:

__________________

Please provide a Council Tax bill covering the period of commencement of Council Tax payments (date of deregistration) in support of your request.

7. Duplicate SPID:

7.1 Duplicate SPID

Where more than one SPID is registered in relation to the same Supply Point, please provide details of the SPID to be deregistered in section 3 of this form. **Details of the SPID to remain in the market should be entered in the section below.** Please include the full details as held on your records:

32 The effective date of demolition should be the date provided on the demolition certificate where available. Where no certificate is available the date of deletion on the SAA property register should be used.
| Water SPID: | ________________________________ |
| Sewerage SPID: | ________________________________ |

| SAA property reference number: | ________________________________ |

| Company Name: | ________________________________ |
| Building Number: | ________________________________ |
| Building Name: | ________________________________ |
| Address line 1: | ________________________________ |
| Address line 2: | ________________________________ |
| Address line 3: | ________________________________ |
| Town: | ________________________________ |
| Postcode: | ________________________________ |
| Market Rateable Value of property: | ________________________________ |
| SAA Rateable Value of property: | ________________________________ |

Please provide the unique property reference number(s) requested below:

| SAA Reference Number: | ________________________________ |
| UPRN: | _____________________________ |

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Missing entry from the SAA
- Agricultural land, buildings and troughs
- Fish farms, fishing, and sporting rights
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Parks, Allotments and Sports Ground
- Infrastructure Project
- Property is multi-tenancy
- Not yet issued by planning
- Other (please provide details)

Other (please provide details)

---

33 SAA (Scottish Assessors Association) property reference number can be obtained from the Scottish Assessor's website – www.saa.gov.uk
34 Market Rateable Value refers to the value as held in central systems.
35 SAA Rateable Value refers to the latest value held against the property on the SAA register.
36 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN can be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
Is the Supply Point to be deregistered a duplicate Supply Point registered through the Gap Site process?

Yes ☐
No ☐

If yes, please complete section 7.2

7.2 Duplicate SPID registered through the Gap Site process

Please complete this section only where the duplicate Supply Point was created through the Gap Site process.

Did you request the registration of the Supply Point through the Gap Site process?

Yes ☐
No ☐

Please provide the details of all data transactions submitted to the CMA in relation to the Supply Point to be deregistered:

Sewerage SPID
T003.0 submitted ☐
Date submitted: __________________________

Water SPID
T003.0 submitted ☐
Date submitted: __________________________
T005.1 submitted ☐
Date submitted: __________________________
Please provide the details of any other data transactions submitted to the CMA in relation to the Supply Point to be deregistered:

<table>
<thead>
<tr>
<th>SPID</th>
<th>Data Transaction reference</th>
<th>Date submitted</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. No Water Connection:

Please indicate why the property is not connected to the Public Water Supply System:

☐ Private water supply
☐ No water connection/no services at the premises
☐ Other
If other, please specify:

_____________________________________________________

If the Sewerage SPID is also to be deregistered please complete section 9.

9. No Sewerage Connection:

9.1 Sewerage

Please indicate where Sewerage from the property drains to:

☐ No Sewerage facilities at the premises
☐ Septic Tank
☐ Soakaway
☐ Septic Tank and Soakaway
☐ On-site Treatment Facility
☐ Other
If other, please specify:

_____________________________________________________

9.1A Scottish Water Response to Sewerage Connection

This section will be completed by Scottish Water following the Sewerage connection investigation and ensures the requisite information is passed to the Licensed Provider.

<table>
<thead>
<tr>
<th>Findings of Inspection</th>
<th>Response</th>
<th>Mandatory/Optional</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Non-Household</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>Customer’s Supply Point ID(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------</td>
<td>--</td>
<td></td>
</tr>
<tr>
<td><strong>SAA reference/SAA Reference Number</strong></td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td><strong>UPRN</strong></td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Address visited</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Visit/Desk assessment</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Date of visit (dd/mm/yy)</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Analysis undertaken to determine conclusion, e.g., dye test, GIS analysis, etc</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Do foul sewerage charges apply? (Yes/No)</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Do property drainage charges apply? (Yes/No)</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Do roads drainage charges apply? (Yes/No)</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Which sewerage charges apply? (list)</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Change to market data (Yes/No)</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>If ‘Yes’ to above, expected date of transaction (dd/mm/yy)</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>Charge to Licensed Provider for visit</td>
<td>Mandatory</td>
<td></td>
</tr>
<tr>
<td>Other supporting information inc reason for visit</td>
<td>Optional</td>
<td></td>
</tr>
</tbody>
</table>

### 9.2 Property Drainage

Does any rainwater drain from the property to the Public Sewerage System?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>☐</td>
</tr>
<tr>
<td>No</td>
<td>☐</td>
</tr>
</tbody>
</table>
Please indicate where rainwater from the premises drains to:

- Soakaway
- On-site Treatment Facility
- Watercourse
- Other

If other, please specify:

_________________________________________________________________________________

For septic tanks, please provide evidence of the septic tank on site in support of the request, such as the septic tank registration number and/or registration certificate, a recent septic tank emptying invoice or Scottish Water reference number.

9.2A Scottish Water Response to Property Drainage Investigation

This section will be completed by Scottish Water following the Property Drainage investigation and ensures the requisite information is passed to the Licensed Provider.

<table>
<thead>
<tr>
<th>Findings of Inspection</th>
<th>Response</th>
<th>Mandatory/Optional</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Non-Household Customer’s Supply Point ID(s)</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>SAA reference/Reference Number</td>
<td></td>
<td>Optional</td>
</tr>
<tr>
<td>UPRN</td>
<td></td>
<td>Optional</td>
</tr>
<tr>
<td>Address visited</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>Visit/Desk assessment</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>Date of visit (dd/mm/yy)</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>Analysis undertaken to determine conclusion, e.g., dye test, GIS analysis, etc</td>
<td></td>
<td>Mandatory</td>
</tr>
<tr>
<td>Do property drainage charges</td>
<td></td>
<td>Mandatory</td>
</tr>
</tbody>
</table>
10. Bulk (Landlord) Meter:

Please provide details of the parent/landlord premises through which services to the SPID to be deregistered are charged.

10.1 Bulk Meter SPID Details

Water SPID: ________________________________

Sewerage SPID: ________________________________

Current SPID status at the CMA (Vacant/Occupied/Long Term Vacant etc.):

________________________________

10.2 Bulk Meter Address Details

SAA property reference number:34 ________________________________

Company Name: ________________________________

Building Number: ________________________________

Building Name: ________________________________

Address line 1: ________________________________

Address line 2: ________________________________

Address line 3: ________________________________

Town: ________________________________

34 SAA (Scottish Assessors Association) property reference number can be obtained from the Scottish Assessor’s website – www.saa.gov.uk
Postcode: ________________________________
Market Rateable Value of property: ________________________________
SAA Rateable Value of property: ________________________________

Please provide the unique property reference number(s) requested below:

SAA Reference Number: _____________________________
UPRN: _____________________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:
Property not yet rated
Missing entry from the SAA
Agricultural land, buildings and troughs
Fish farms, fishing, and sporting rights
Fish parks, Allotments and Sports Ground
Property is multi-tenancy
Other (please provide details)

Where the UPRN is not available, please provide a valid supporting reason(s) below:
Missing entry from the OSG
Fish farms, fishing, and sporting rights
Property is multi-tenancy
Infrastructure Project
Agricultural including troughs
Not yet issued by planning
Other (please provide details)

10.3 Bulk Meter Details

Meter ID: ______________________________________
Physical meter size: ______________________________________
Number of Dials: ______________________________________
Meter serial number: ______________________________________

10.4 Addresses Supplied through the Bulk Meter

Market Rateable Value refers to the value as held in central systems.
SAA Rateable Value refers to the latest value held against the property on the SAA register.
The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN can be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
Please provide address details for all other units/tenant addresses supplied through the bulk meter. Please provide details on a separate sheet if necessary.

Water SPIDs (if applicable): _____________ _____________ _____________

Please tick here if Water SPID is to be deregistered

[ ] [ ] [ ]

Date deregistration should be effective from:

Sewerage SPIDs: _____________ _____________ _____________

Please tick here if Sewerage SPID is to be deregistered

[ ] [ ] [ ]

Date deregistration should be effective from:

Please tick here if Property Drainage is to be removed

[ ] [ ] [ ]

Date Service Elements should be removed from:

SAA property reference number/Reference Number: _____________ _____________ _____________

UPRN: _____________ _____________ _____________

Company Name: _____________ _____________ _____________

Unit Number: _____________ _____________ _____________

Building Number: _____________ _____________ _____________

Building Name: _____________ _____________ _____________

Address line 1: _____________ _____________ _____________

Address line 2: _____________ _____________ _____________

Address line 3: _____________ _____________ _____________

Town: _____________ _____________ _____________

Postcode: _____________ _____________ _____________

Market Rateable Value of property:

---

41 SAA (Scottish Assessors Association) property reference number can be obtained from the Scottish Assessor’s website – www.saa.gov.uk. UPRN can be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk
11. Merged Property:

11.1 Current (merged) premises details

Please provide the current details for the property into which the previous property has merged.

| Water SPID: | ________________________________ |
| Sewerage SPID: | ________________________________ |
| **SAA property reference number** | ________________________________ |
| Company Name: | ________________________________ |
| Building Number: | ________________________________ |
| Building Name: | ________________________________ |
| **Address line 1:** | ________________________________ |
| **Address line 2:** | ________________________________ |
| **Address line 3:** | ________________________________ |
| Town: | ________________________________ |
| Postcode: | ________________________________ |
| **Market Rateable Value of property** | ________________________________ |
| **SAA Rateable Value of property** | ________________________________ |

Please provide the unique property reference number(s) requested below.

---

42 Market Rateable Value refers to the value as held in central systems.
43 SAA Rateable Value refers to the latest value held against the property on the SAA register.
44 SAA (Scottish Assessors Association) property reference number can be obtained from the Scottish Assessors Association website – www.saa.gov.uk.
45 Market Rateable Value refers to the value as held in central systems.
46 SAA Rateable Value refers to the latest value held against the property on the SAA register.
47 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN can be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
SAA Reference Number: ____________________

Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Missing entry from the SAA
- Agricultural land, buildings and troughs
- Fish farms, fishing, and sporting rights
- Infrastructure Project
- Parks, Allotments and Sports Ground
- Agricultural including troughs
- Property is multi-tenancy
- Property is multi-tenancy
- Not yet issued by planning
- Other (please provide details) __________________

UPRN: _____________________________

Where the UPRN is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the OSG
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Infrastructure Project
- Agricultural including troughs
- Property is multi-tenancy
- Not yet issued by planning
- Other (please provide details) __________________

Meter ID: ______________________________________

Physical meter size: ______________________________________

Number of Dials: ______________________________________

Meter serial number: ______________________________________

Please provide the date on which the property merged: __________________

Current SPID status at the CMA (Vacant/Occupied/Long Term Vacant etc.): __________________

Does the merged property only have one connection to the Public Water Supply System:

- Yes
- No
- Unknown
If no, please provide a description of the current connection status. Please include all relevant SPID, address and meter details and any previous Scottish Water service request references in support of your application:

____________________________________________________________________________
____________________________________________________________________________

11.2 Previous (unmerged) premises details
Please provide the details of the property/properties which are now merged into the current property (as set out in section 11.1 above) and require to be deregistered. Please provide details on a separate sheet if necessary.

<table>
<thead>
<tr>
<th>Property 1</th>
<th>Property 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water SPID</td>
<td>Sewerage SPID</td>
</tr>
<tr>
<td>to be deregistered</td>
<td>to be deregistered</td>
</tr>
<tr>
<td>Effective date</td>
<td>Effective date</td>
</tr>
<tr>
<td>of deregistration</td>
<td>of deregistration</td>
</tr>
</tbody>
</table>

SAA property reference number:

Company Name:
Building Number:
Building Name:
Address line 1:
Address line 2:
Address line 3:
Town:
Postcode:
Market Rateable Value of property:
SAA Rateable Value of property:

Please provide the unique property reference number(s) requested below:

SAA Reference Number: __________________________ UPRN: __________________________

---

44 SAA (Scottish Assessors Association) property reference number can be obtained from the Scottish Assessors Association website – www.saa.gov.uk.

45 Market Rateable Value refers to the value as held in central systems.

50 SAA Rateable Value refers to the latest value held against the property on the SAA register.

51 The SAA Reference Number will only be available after a property has been rated and can be obtained from the Scottish Assessors Association website – www.saa.gov.uk. UPRN can be obtained from the One Scotland Gazetteer website - www.onescotlandgazetteer.org.uk.
Where the SAA Reference Number is not available, please provide a valid supporting reason(s) below:

- Property not yet rated
- Missing entry from the SAA
- Agricultural land, buildings and troughs
- Fish farms, fishing, and sporting rights
- Property is multi-tenancy
- Infrastructure Project
- Parks, Allotments and Sports Ground
- Agricultural including troughs
- Property is multi-tenancy
- Not yet issued by planning

Other (please provide details):

____________________________

____________________________

Meter ID: __________________

Physical meter size: ______________

Number of Dials: ______________

Meter serial number: ______________

Current SPID status at the CMA (Vacant/Occupied/Long Term Vacant etc.):

__________________________

12. Consent to contact the Non-Household Customer:

Scottish Water may wish to contact the Non-Household Customer to arrange a visit to the premises. 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: ☐

13. Additional Information:
Please provide any additional information relevant to the request where appropriate. If supporting information is provided separately please indicate here:

________________________________________________________________

________________________________________________________________

________________________________________________________________

________________________________________________________________

14. **Declaration on behalf of the Licensed Provider:**

We hereby acknowledge we have undertaken investigations to confirm the status of Water Services and/or Sewerage Services at this site and that following these investigations we believe this Supply Point should be deregistered for the reason stated above. The information provided in this form is correct to the best of our knowledge and up to date at the date of submission.

Name: _______________________________

Job Title: _______________________________

Signature: _______________________________

Date: _______________________________