

Form A/04:

**Application to connect to the
Wholesaler's sewerage system**

Form A/04: Application to connect to the Wholesaler's sewerage system

For use by Retailers

Application for the Connection of an individual eligible premises to the Sewerage System

To Sewerage Wholesaler

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This form should be used where one of the Retailer's Non-Household Customers requires a new connection between a drain or private sewer and the Wholesaler's Sewerage System under Process A4 of the Operational Terms.

This form sets out the information required to give notice of an intention to make a connection (sewerage communication) and to request an offer of connection to the Sewerage System for an eligible premises. The form is divided into sections as follows

| Number | Section |
|--------|---|
| 1. | Retailer details |
| 2. | Reason for request |
| 3. | Eligible premises to be connected |
| 4. | Contractor details |
| 5. | Connection details |
| 6. | Special requirements |
| 7. | Request for trench inspection or other notice of proposed connection date |
| 8. | Change/resubmission of application details |
| 9. | Confirmation of completion of connection |
| 10. | Declaration |

Different parts of this form are mandatory at different stages of the connection application process. Section 2 sets out which sections are mandatory and when. Those sections marked with an asterisk (*) are always mandatory.

Mandatory means that the Retailer must provide the requested information wherever it applies to the particular request. If a piece of information does not exist or is not applicable in the circumstances, the Retailer must note this and, where relevant, provide a reason why it is not applicable.

The relevant sections of the form should be completed and submitted to the Sewerage Wholesaler in the following stages

- Notice of intention to make a connection and request for an offer of connection to the Sewerage System – sections 1-6;
- providing a minimum of 5 calendar days advance notice, a request for Trench Inspection – section 7;
- (where applicable) following any change to the details of the application for connection – section 8;
- Following the connection to the Sewerage System, confirmation of completion of connection – section 9.

The Retailer must complete a declaration (section 10) at each stage of the application. A revised form should be submitted where any details previously provided have been updated. Mandatory information will vary depending on the stage of the process.

1. *Retailer details

Retailer name

Retailer ID

Retailer's own reference

Contact name

Contact number

Contact e-mail

Nominated contact for access to Sewerage Wholesaler's connections portal, if relevant

The Retailer may nominate one third-party (non-Retailer) contact who will have access to view the application details through the Sewerage Wholesaler's customer portal. If such access is required, please provide the third party's details below.

Company name

Contact name

Contact number

Contact e-mail

2. *Reason for request

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

- Notice of intention to make a connection to the Sewerage System Please complete sections 3 – 6
- Request for Sewerage Wholesaler to carry out a Trench Inspection. Please complete section 7
Please provide Sewerage Wholesaler's previous reference for the connection application (this is mandatory before completing section 7)
.....
- Change to an application for a connection to the Sewerage System. Please complete section 8
Please provide Sewerage Wholesaler's previous reference for the connection application (this is mandatory before completing section 8)
.....
- Re-submission of an application for a connection to the Sewerage System following a rejected or lapsed application or completion of a development impact assessment. Please complete section 8
Please provide Sewerage Wholesaler's previous reference for the connection application (this is mandatory before completing section 8)
.....

| | |
|---|---------------------------|
| <input type="checkbox"/> Notice of completion of a connection to the Sewerage System. Please provide Sewerage Wholesaler's previous reference for the connection application (this is mandatory before completing section 10) | Please complete section 9 |
|---|---------------------------|

3. Eligible premises to be connected

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

Type of premises (please tick appropriate box)

| | |
|---|--|
| <input type="checkbox"/> Hospital <input type="checkbox"/> School <input type="checkbox"/> Warehouse <input type="checkbox"/> Agriculture <input type="checkbox"/> Holiday Chalets <input type="checkbox"/> Office | <input type="checkbox"/> Prison <input type="checkbox"/> Care Home <input type="checkbox"/> Factory <input type="checkbox"/> Shop <input type="checkbox"/> Hotel <input type="checkbox"/> Other |
|---|--|

If other, please specify

.....

Is there an existing sewerage connection to the site or premises?

Yes

No

If yes, please complete section 3.1 in addition to section 3

Please quote any Sewerage Wholesaler reference previously given to your site

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Address of new premises

Plot/Unit

Building number

Building name

Site

Street

Town

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

Yes

No

If yes, please indicate investigation measures adopted

.....
.....
.....

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 or residential home

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Additional information in support of application

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.....
.....

3.1 New sewerage connection at existing eligible premises

SPID (if registered)

Postal address of premises

Building number

Building name

Address line 1

Address line 2

Address line 3

Town

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 existing at the property (e.g. septic tank)
- Other

If other please specify

.....
.....

Any additional information relating to request

.....
.....
.....

4. Contractor details

The name of the contractor 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

.....

E-mail address

.....

Preferred contact method

.....

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 Trade Effluent Consent application reference (where available)

.....

Additional information in relation to the connection

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Type of connection proposed

Foul

Surface Water

Combined

Number of connections

Diameter of connection

Type of connection (manhole, saddle, branch, etc.)

Please specify pipe material of your proposed connection

Do you propose a gravity discharge connection 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

Anticipated annual water consumption of the site in cubic meters

..... m³

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)

Are there proposals for rain water harvesting at the premise?

- Yes
- No

If yes, which methods are proposed?

.....

Please provide further information on the proposals

.....

.....

Information about the water supply

Does or will the premises have a water connection?

- Provided now
- Planned

Name of Water Wholesaler

SPID where available

Water connection application reference if made to the same Wholesaler
.....

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 the relevant standards documentation.

- Site of location plan (OS or GIS location.....)
- On-site design proposals (within property boundary)
- Off-site design proposals (from property boundary to the Water Supply System)
- Drainage layout proposal
- Flow control device calculations (if applicable)
- Soil investigation (SI) report (if applicable)

- Wholesaler reference for any development impact assessment undertaken
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6. Special requirements

For registration of the supply to the eligible premises, please tick the appropriate box below and provide the relevant information

- A new Sewerage Services SPID in relation to the eligible premises is required
- There is already a SPID for the sewerage supplies to the premises
Please provide existing SPID
- Only a Sewerage Services SPID is required for the eligible premises because the Non-Household Customer will only use Sewerage Services
- Only a Sewerage Services SPID is required because the eligible premises is only eligible for Sewerage Services
- There is already a Water Services SPID for the eligible premises
Please provide existing SPID
Please provide other sewerage Wholesaler name
- An application has been or will be made for a Water Services Connection at this premises. Please provide pairing reference
This should be the same reference quoted on the application for a Water Services Connection.
Date of other application(s)
If not yet made, please indicate anticipated date of application.
Water Retailer ID

7. Request for trench inspection or other notice of proposed connection date

Contact for Trench Inspection

Name

Company

Job title

Telephone number

Mobile telephone number

E-mail

Preferred contact method

Preferred date(s) for Trench 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

UPRN, if available

VOA BA Reference, if available

8. 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
- Special requirements
- Request for Trench Inspection or other notice of proposed connection date

Please provide any additional information in relation to the change.

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9. 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 contractor who carried out the connection

Name of contractor

Contact name (if company name entered above)

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Address

.....

.....

Postcode

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Phone number

.....

Mobile phone number

.....

Fax number

.....

E-mail address

.....

Preferred contact method

.....

Confirmation of Non-Household Premises' address

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

SPID
UPRN, if available³
VOA BA Reference, if available⁴
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.

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Please provide "as built" drawings with this form.

³ If not available please provide a reason
⁴ If not available please provide a reason

