

Form B



Application for an Individual Premises Sewerage Connection

For Use by Licensed Providers

1. Licensed Provider Details:

Licensed Provider _____

Licensed Provider ID: _____

Contact name: _____

Contact number: _____

Contact e-mail: _____

2. Premises to be Connected:

Please quote any Supply Point ID, or _____

other Scottish Water reference previously given to your site _____

Application Details:

Site details/premises to be connected

Postal address of new premises _____

Postcode(s): _____

Development Specification:

Type of premises (please tick appropriate box)

- | | | | |
|--------------------|--------------------------|---------|--------------------------|
| Warehouse | <input type="checkbox"/> | Factory | <input type="checkbox"/> |
| Agriculture | <input type="checkbox"/> | Shop | <input type="checkbox"/> |
| Holiday Chalets | <input type="checkbox"/> | Hotel | <input type="checkbox"/> |
| Site Accommodation | <input type="checkbox"/> | Office | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | | |

If other, please specify: _____

Business Use (by SIC* code): _____

Type of premises (please tick appropriate box):

- | | |
|----------|--------------------------|
| New | <input type="checkbox"/> |
| Existing | <input type="checkbox"/> |

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:

* The United Kingdom Standard Industrial Classification of Economic Activities [UK SIC (92)]

3. 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: _____

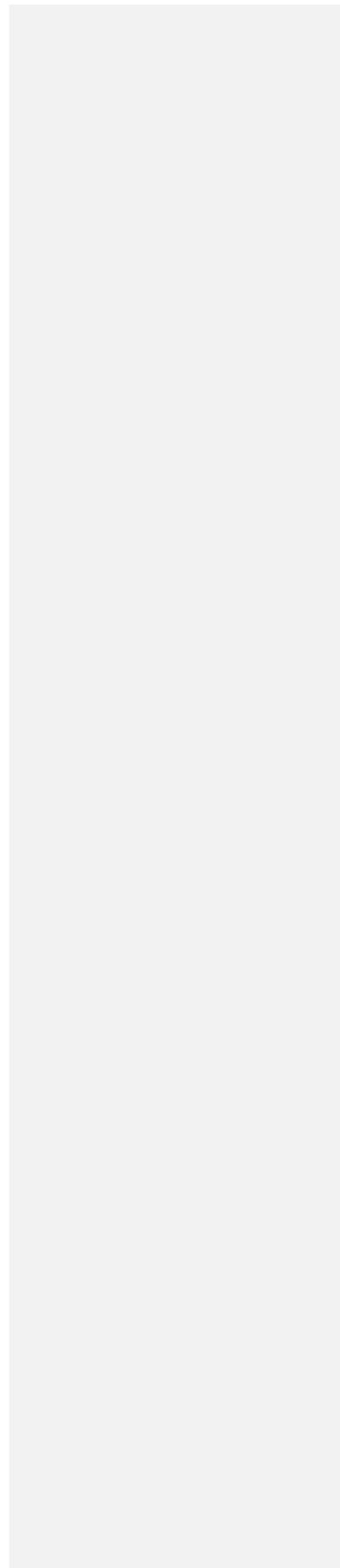
Mobile phone number: _____

Fax number: _____

Email address: _____

4. 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: _____

Type of connection proposed:

	Foul	Surface water	Combined
Number of connections:	_____	_____	_____
Diameter of connection:	_____	_____	_____
Type of connection (Manhole, Saddle, Branch, etc.)	_____	_____	_____

Anticipated annual water consumption from the site
in cubic metres m³

5. Drawings/Calculations Provided with this Form:

Reference: _____ Title: _____

6. Special Requirements:

In making this application Scottish Water will by default create a SPID pair with all relevant Sewerage Services attached. You do have an option to change this default position by ticking one of the boxes below.

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.

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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 Sewerage SPID is required because the customer is using another Licensed Provider for their Water SPID.
- Only a Sewerage SPID is required because the customer will only use Sewerage Services.
- Other (please explain below):

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Please outline special needs requirements as appropriate:

7. Declaration:

I/We hereby make application to Scottish Water to make a connection to the public waste water system.

I/We undertake to abide by the terms laid down in 'Sewers for Scotland' and 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.

I/We have enclosed all the necessary supporting documentation (tick the boxes below where appropriate).

Drawings (all cases)

Calculations (where appropriate)

Your details

Signature: _____ Date: _____

Full name (in capitals): _____

Role in the company or job title: _____

