**Annex A CMA Market Training/Assurance Application**

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| --- | --- |
| Company name: |  |
| Name: |  |
| Title/Position: |  |
| Address: |  |
| Tel: |  | **Fax:** |  |
| Email: |  |
| Date: |  |

I confirm that it is our intention to operate in the Water Market in Scotland in the following Licensed Provider Role(s)

|  |  |
| --- | --- |
| Please indicate the communications method(s) by 🗸 the boxes below | Please indicate types of provision by 🗸 the boxes below |
|  | Low Volume Interface (Training Process applies) |   | Water Supply |
|  | High Volume Interface (Assurance Process applies) |   | Sewerage Supply |
|  |  |   | Trade Effluent  |
|  |  |  | Self Supply |

|  |
| --- |
| Please provide as much of the following as you are able: |
| Target date for registration of first supply point. |  |
| How critical is this date to your business? |  |
| Preferred dates for CMA training on Low Volume Interface |  |
| **If operating High Volume Interface:** Date expected to be ready to start CMA Assurance. |  |

Signed: ……………………………… Position: ……………………………………………. Date:

Please e-mail this application to: enquiries@cmascotland.co.uk, or sign and Fax to: 01786 468 868 or post to: The Central Market Agency, Enterprise House, Springkerse Business Park, Stirling, FK7 7UF Tel: 01786 468 860. The CMA will respond within three working days.