|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **SL-N3A Request for Bristol Water to Make a Mains Connection** | | | | | | | | | | | |
| This form should be used when Bristol Water is to connect up self-laid mains to the existing network. It should be submitted, 7 days in advance of the date on which the self-laid mains are to be swabbed, chlorinated and pressure tested, to  [NetworkSiteAgents@bristolwater.co.uk.](mailto:%20NetworkSiteAgents@bristolwater.co.uk) | | | | | | | | | | | | |
| **1. Scheme Details** | | | | | | | | | | | | |
| Site Name: |  |  | Developer: | | |  |  |  |  |  |  |  |
|  |  |  |  | | |  |  |  |  |  |  |  |
| SLP: |  |  | Bristol Water Application Number (eg MLA 1234567): | | | | | | | |  |  |
| **2. Swabbing, Pressure Testing, Chlorination & Connection Dates** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| When do you intend to swab the mains? | | | | DD |  | MM |  | | YY |  |  |  |
| When do you intend to pressure test the mains? | | | | DD |  | MM |  | | YY |  |
| When do you intend to chlorinate the mains? | | | | DD |  | MM |  | | YY |  |
| When will the mains be ready for sampling by Bristol Water? | | | | DD |  | MM |  | | YY |  |
| When would you like Bristol Water to connect up the  mains? | | | | DD |  | MM |  | | YY |  |
|  | | | | | | | | | | | | |
| **3. Details of the Mains to be Commissioned** | | | | | | | | | | | | |
| How many **end** washouts or end hydrant/washouts are there on the mains that are to be commission | | | | | | | | | | ed?  **ins** |  |  |
| **You must attach a plan**, showing the mains on this site, to this form. Please clearly **highlight the ma that are to be commissioned**. Tick to indicate that such a plan is attached. | | | | | | | | | |
| Please indicate the diameters and approximate length of the mains that are to be commissioned. | | | | | | | | | |
|  | | Diameter (mm) | Length (m) | | | | |  | | | | |
| 63 |  | | | | |
| 90 |  | | | | |
| 125 |  | | | | |
| 180 |  | | | | |
| Other (please specify) |  | | | | |
|  | | | | | | | | | | | | |

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