Self Lay Mains Scheme Request for testing and sampling



This form must be emailed to NW prior to commencement of testing and sampling

Email: SelfLay@nwl.co.uk

NW Ref.	Q					
Date Sent to NW						
Self Lay Organisation	on (SLO)					
Site Contact Name						
Contact Telephone I	Number					
Site address						
Location/Section of main and Plot No.'s						
Material			Length (m)		Diameter (mm)	
dates are required and	not proposed	dates or w	eek comn			
Please note dates produced and Please Date pressure testing chlorination will comm (Minimum notice 15 working)	Note: You mu	dates or w	eek comn	nencing dates.		
Date pressure testing chlorination will comm (Minimum notice 15 working	Note: You mu	dates or w	eek comn	nencing dates.		
Please Date pressure testing chlorination will comm	Note: You mu	dates or w	eek comm	nencing dates.		

NW office use only

Date form received by New	Date form passed to	
Development	Construction Supervisor	