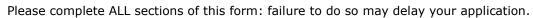
Water Supply (Water Fittings) Regulations 1999

Application for an RPZ Valve (type BA device) to an existing device





| Application form |
|--|
| Section 1: Details of Postal address/site where the device is to be installed: |
| Company: Phone: |
| Address: |
| |
| Email: |
| Section 2: Please provide details of the person installing the device: |
| Plumber/Contractor: |
| Address: |
| |
| Phone: Email: |
| Which approved scheme are they a member of: |
| Membership number: |
| Section 3: Please provide details of the site contact who will be responsible for organising the initial commissioning/testing of the device: |
| Name: Company: |
| Contact details: |
| Section 4: Please provide details of the site contact who will be responsible for organising the annual testing of the device (if different from section 3 above): |
| Name: Company: |
| Contact details: |
| Section 5: Please provide details of the person commissioning/testing the device: |
| Plumber/Contractor: |
| Address: |
| |
| Phone: Email: |
| Which approved scheme are they a member of: |
| Membership number: |
| Section 6: If application is being made in connection with either a New Anglian Water connection of a Water Regulations team inspection, please give the reference no: |
| Refence Number: |
| Section 7: Intended make/manufacturer of the device to be used (if known): |
| Make/manufacturer: |

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| Section 8: Intended model number and size of the device to be used (if known): Make/manufacturer: | |
|---|---|
| Section 9: Intended location (which part of the building) will be device be installed: Location: | |
| Section 10: Please state the type and use of the plant/equipment which the proposed device is to supply: | I |
| Type: | |
| Use: | |
| Section 11: Please state the names/concentrates and provide material safety data sheets of any chemicals or substances that are proposed to be used downstream of the device: | |
| | |
| Section 12: Please confirm the method of water supply to the device: | |
| Mains Storage Hot Water Cold Water | |
| Section 13: Please provide a sketch below of the proposed installation showing both the proposed RPZ valve and the plant/equipment which the RPZ valve will supply: | |
| Section 14: Applicants details and date of application: | |
| Name: | |
| Company: | |
| Address: | |
| Phone number (s): | |
| Email: | |
| Signature: Date: | |

Please return completed form to: rpz@anglianwater.co.uk.

Alternatively, it can be posted to:

Water Regulations Team, Anglian Water Services, Lancaster House, 4 Lancaster Way, Ermine Business Park, Huntingdon PE29 7DU.

Telephone: 0345 600 1063