

FORM 3W: Application to Shutdown or Live Tap Water Reticulation Assets

(Submitted by pipe layer or design consultant 10 working days prior to shutdown or 5 working days prior to live tapping)

Attention:- Land Development Team - Developerworks@gippswater.com.au
 Asset Delivery - send directly to Responsible Officer at Gippsland Water
 Field Services - DispatchFieldOperations@gippswater.com.au
 Or deliver to - Traralgon Office, 55 Hazelwood Road, Traralgon 3844
 Enquiries Telephone No 1800 057 057

Gippsland Water Reference	
Job Description <small>(must be specific)</small>	
Location	
Pipe Layer	
Pipe Layer e-mail	
Pipe Layer Contact Details	Phone
Gippsland Water Drawing Number(s)	

Confirmation of pipe details for works Check for pipe ovality Do you have all fittings required for the job	Pipe OD (mm)	
	Pipe material	

*These above details are to be checked by the applicant by excavation of the pipe **prior to shutdown.***

Pressure test results attached
 Water quality results attached
 (include both NATA water quality test results & chlorination report)

A Proposed Shutdown Date (MAX 4 HR PERIOD FOR SHUTDOWN)

Commencement Date_____ Time_____	Completion Time_____
---	-----------------------------

B Proposed Live Tapping Date and Time

Date_____ Time_____

C Pipe Layers' or Design Consultants Certification

I certify that:

- 1 Works will be constructed;
 - in accordance with design
 - all relevant Gippsland Water Specifications, Codes and relevant Australian Standards
- 2 the handling, laying jointing and backfilling of pipelines will be carried out under the continuous supervision of the specified pipe layer accredited by Gippsland Water.
- 3 Safety of personnel engaged in the works will comply with the OH&S Act, Regulations and Compliance Codes.
- 4 I indemnify and keep indemnified Gippsland Water against all loss, injuries or damage to third party people or property caused by the construction of the works and/or the method of construction of the works.
- 5 I agree to notify Gippsland Water within 24 hours of any changes to the information certified.

Name
(Pipe Layer OR Design Consultant)

Signature

Date

GW Use:

Approved for start works _____

Name

Signature

