Attention:-



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)

Gippsland Water Reference		
Job Description (must be specific)		
Location		
Pipe Layer		
Pipe Layer e-mail		
Pipe Layer Contact Details	Phone	
Gippsland Water Drawing Number(s)		
Confirmation of pipe	Pipe OD (mn	n)
details for works	Pipe materia	,
Check for pipe ovality		
Do you have all fittings red	quired for the job	
These above details are to shutdown.	o be checked by the ap	oplicant by excavation of the pipe prior to
Pressure test results attac	hed	
Swabbing results attached		
Water quality results attac		- A NATA
`	•	eet, NATA water quality test results with its as per specifications & chlorination rep
-	•	AX 4 HR PERIOD FOR SHUTDO Monday or Friday)
Commencement		ompletion
Commencement		















C Pipe Layers' or Design Consultants Certification

I certify that:

- 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.
- Safety of personnel engaged in the works will comply with the OH&S Act, Regulations and 3 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		Signature	
(Pipe Layer OR Design Consultan	t)		
Date			
Dato			
W Use:			
pproved for start works			
Name		Signature	











