APPLICATION FOR PERMISSION TO CONNECT TO GROUP WATER SUPPLY SCHEME

Office application reference:_____

Connection to _____ **Group Water Supply (GWS) Scheme**

Name of applicant(s): _____

Phone number(s):   Work:_____   Home:_____

Correspondence address of applicant(s):   _____

_____

Address at which connection is required: _____
(**Site map** must be enclosed and marked
where connection is required)

_____

Tick category of premises to be connected:
Domestic Δ   Industrial Δ   Farm Δ   Business Δ   Fire hydrant Δ   Other Δ

Is this a new premises?   _____   If so, give planning reference no. _____

Planning contribution receipt no. _____   Amount: _____   Date Paid:_____

INSURANCE OPTIONS

♦ GWS personnel will be making the connection. The GWS insurance indemnifies Clare County Council for up to €6.4m, and a copy of this is attached.   Yes □   No □
♦ A contractor will be making the connection and has public liability insurance which indemnifies Clare County Council for up to €6.4m. A copy of this is attached.   Yes □   No □
♦ The person who will be making the connection has signed the road opening licence application form.   Yes □   No □

Road opening costs depend on the location of the group scheme mains and the category of road to be opened and restored. Any queries relating to road opening can be dealt with by our Roads Dept. Tel: (065) 6821616 *Ext.* 312/362

Declaration by Applicant

I have paid the relevant connection charge to the GWS. I am aware that an annual water rent may be payable in respect of the supply. I am aware that all new connections must be metered.

Signature(s) of applicant(s) _____ Date _____

DECLARATION BY GWS PERSONNEL

This GWS can cater for this development and the applicant has the approval of the Group Scheme to make the above described connection. Insurance arrangements have been made by the applicant.

Signed: GROUP SECRETARY _____ Date: _____

Name of Group Secretary in Block Capitals _____

Address: _____ Tel: _____

FOR OFFICIAL USE ONLY

Amount of planning contribution paid   _____ Receipt no _____ Date _____

Amount of road opening fee paid   _____ Receipt no _____ Date _____

O/S revenue charges: Yes/No Amount   _____ Account no _____

TYPE OF CONNECTION

(i)	0.5" Tapping plus 0.5" Service	Δ
(ii)	0.5" Tapping plus 0.75" Service	Δ
(iii)	0.5" Tapping plus 1" Service	Δ
(iv)	Supply to be metered	Δ
(vi)	Special conditions if any	Δ

I confirm that permission can be granted to this applicant to connect to the G.W.S.

Executive Engineer: _____ *Date:* _____

Senior Staff Officer: _____ *Date:* _____

Senior Executive Officer: _____ *Date:* _____