

3 WATERS

Application to Connect to Council Water Infrastructure

Please email your application to **IM@wmk.govt.nz** and copy in the Council Engineer.

No work shall be undertaken on Council water infrastructure without completion of this form and oversight by designated Council staff.

Key to filling in this form

Applicant to fill in the grey cells and provide attachments as referenced.

Council Engineer to fill in the green cells (this is the Subdivisions Engineer for subdivisions, or the Engineer's Representative for Council capital projects).

Water Engineer to fill in the blue cells (this is the 3 Waters Water Engineer).

Water Unit to fill in the orange cells.

PLEASE NOTE - A signature is not required if you submit this form electronically. By entering your name in the boxes throughout this form you are giving your authority for this application to proceed.

Process

1. Applicant to complete Section One (grey cells) of the form and attach required documents. Applicant to send the form to **IM@wmk.govt.nz** and copy in the Council Engineer a minimum of 20 working days prior to connection.
2. Council Engineer and Water Engineer to sign off Section One and return the form to the applicant.
3. Applicant to complete sections 2.2 to 2.4 between 12-15 days prior to connection (unless otherwise directed by the Council Engineer).
4. Applicant to complete Section Two (grey cells) and section 3.1 (grey cells only) of the form and attach required documents. Applicant to send the form to **IM@wmk.govt.nz** and copy in the Council Engineer a minimum of 8 working days prior to connection. Note: Section Two can be submitted at the same time as Section One if applicable.
5. Council Engineer and Water Engineer to sign off Section Two and return the form to the applicant, with the approval for the connection works to proceed on the specified time and date. Council Engineer to email Water Unit to have the stand-over work order created.
6. Water Unit to complete Section Three of the form and return to the Council Engineer and Water Engineer.
7. Council Engineer and Water Engineer to sign off Section Three and email the form (and any associated documents) to **IM@wmk.govt.nz**

Timeframe

Minimum 20 Working Days Prior	12–15 Working Days Prior	Minimum 8 Working Days Prior	Proposed Date of Works
Submit Section One of this form with attachments to Council	Completion of chlorine disinfection	Submit Section Two of this form with attachments to Council	Water Unit standover for connection

Section One - Application details

NOTE: This section is to be submitted at least 20 working days before the proposed date of works.

1.1 Applicant details

Full name: _____

Email address for enquiries: _____

Contact number for enquiries: _____

Address for account (invoice): _____

1.2 Connection details

Address of works: _____

Asset number of pipe to connect to if known: _____

Resource Consent (RC) number if applicable: _____

Contract/Project number if applicable: _____

Proposed date of works: _____

1.3 Contractor details

NOTE: This is the contractor the applicant has engaged to make the connection.

Are the contract details the same as the applicant details above?

Yes (skip to staff member name) No (complete the details below)

Company name: _____

Company email address: _____

Company phone number: _____

Company address for account (invoice): _____

Staff member name: _____

NOTE: This staff member is to be present on site at all times to oversee the works and ensure compliance with all required practices.

Staff member qualifications: _____

NOTE: Qualification must be in conjunction with that required by the Waimakariri District Council's Hygiene Code of Practice for Work on Water Supplies.

Staff member contact phone number: _____

Staff member email address: _____

1.4 Waimakariri District Council Hygiene Code of Practice compliance requirements

Applicant to ensure that all works to take place are in accordance with and adhere to the Waimakariri District Council's Hygiene Code of Practice for Work on Water Supplies as may be found at: waimakariri.govt.nz/_data/assets/pdf_file/0027/85419/Waimakariri-District-Council-Hygiene-Code-of-Practice-for-Work-on-Water-Supplies-Nov-2020-Update.pdf

Tick to confirm I have read and understood the 'hygiene code of practice for work on public water supplies'.

1.5 Methodology/Plans

Applicant to provide a methodology explaining how the connection is to be completed (step-by-step description of physical works) with reference to the Waimakariri District Council Hygiene Code of Practice where applicable. Applicant to provide a construction plan(s) showing the new pipework and/or network that is to be connected, including pipework flushing plan(s).

Tick to confirm methodology has been included.

Tick to confirm the water infrastructure plans have been included.

1.6 Health and safety

Applicant to review and approve their contractor's health and safety processes. Applicant will provide the health and safety processes if requested.

Tick to confirm you agree to these conditions.

1.7 Asbestos Cement (AC) cutting plan

If the cut in involves AC pipe, applicant to prepare a SSSP or JSA to document steps taken to manage this risk. Wherever possible, manual cutting methods (chain cutter or handsaw) shall be used for cutting AC pipe to avoid unnecessary dust creation. Only where this is not practicable, may other methods be used in conjunction with dust suppression. To prevent contamination risks only potable water may be used for dust suppression.

Tick to confirm the asbestos pipe cutting plan has been included. N/A

Section One Applicant sign-off

I/we understand the requirements documented on this form and confirm that the information provided is correct.

We acknowledge that we will not connect to the Council water supply system without following the procedures set out in this form.

Signed: _____ Date: _____

PLEASE NOTE - A signature is not required if you submit this form electronically. By entering your name in the box above you are giving your authority for this application to proceed.

Section One Accepted by Council Engineer: Yes No

Signed: _____ Date: _____

Reason for declining (if applicable): _____

Section One Accepted by Water Engineer: Yes No

Signed: _____ Date: _____

Reason for declining (if applicable): _____

Section Two - Requirements prior to connection

NOTE: This section is to be submitted at least 8 working days before the proposed date of works.

Council Engineer to sign N/A if a sub-section is not applicable.

2.1. New pipework to be pressure tested

Applicant to coordinate with the Council's Engineer. Signature to be provided upon completion of pressure test.

Tick to confirm pressure test has been included.

Signed as complete by Council's Engineer:

Date completed: _____ Signed: _____

2.2. New pipework disinfected

Applicant to coordinate with the Council's Engineer. Signature to be provided upon completion of disinfection.

Tick to confirm pipework disinfecting documents have been included.

Signed as complete by Council's Engineer:

Date completed: _____ Signed: _____

2.3. New pipework to be flushed of residual chlorine

Applicant to coordinate with the Council's Engineer. Signature to be provided upon completion of flushing.

Tick to confirm pipework flushing documents have been included.

Signed as complete by Council's Engineer:

Date completed: _____ Signed: _____

2.4. Initial E.coli testing requirements

Applicant to coordinate with the Council's Engineer. The new water infrastructure must be tested for E. coli. If it fails, the disinfection procedure must be repeated until it passes.

Tick to confirm E.coli testing documents have been included.

Signed as complete by Council's Engineer:

Sampling date of compliant E. coli test: _____ Signed: _____

2.5. Further E.coli testing requirements

Applicant to coordinate with the Council's Engineer. The newly chlorinated water infrastructure must be connected to the existing reticulation within 15 working days of chlorination. If not, the main shall be retested for E. coli as per initial testing. If any of the new samples fail the E. coli test, the disinfection procedure must be repeated.

Tick to confirm E.coli testing documents have been included.

Signed as complete by Council's Engineer:

Sampling date of compliant E. coli test if applicable: _____ Signed: _____

2.6 Planning shut-down

Date and time of connection (cut-in): _____

The Water Unit will determine the extend of the shut-down, and confirm required valves for shut-down can be located and are functioning.

The Water Unit will provide a letter and maps to the applicant (or contractor) for the purpose of notifying the affected residents.

Applicant (or contractor) will inform the affected residents by a letter drop a minimum of 48 hours in advance of the shut down.

Tick to confirm you agree to these conditions.

2.7 Fittings compatibility

In section 3.1 the applicant will prepare a list of key fittings that will be present on site to make the connection, and the material and size of the pipe to be connected onto. The Water Unit will not shut down the water supply until it has been confirmed that the correct parts are on site. This includes visually confirming the size and material of the pipe to be connected to.

Tick to confirm the relevant sections in 3.1 have been filled out.

The applicant must ensure all preparation works are completed ready for the scheduled cut-in date and time. This includes having all excavation works, dewatering, and shielding (if applicable) completed.

Tick to confirm you agree to these conditions.

2.8 Cost of Water Unit stand-over

The applicant is not charged for stand-overs for capital projects where the Council is the Principal.

Applicant agrees to pay for all costs associated with the Water Unit stand-over and all work to inspect, test, and commission the new infrastructure. This will be charged at \$97.85 per hour including GST which will be invoiced after the completion of works.

Tick to confirm you agree to these conditions.

Details for invoice

Company/name: _____

Billing address: _____

Section Two Applicant sign-off

I/we understand the requirements documented on this form and confirm that the information provided is correct.

We acknowledge that we will not connect to the Council water supply system without following the procedures set out in this form.

Signed: _____ Date: _____

PLEASE NOTE - A signature is not required if you submit this form electronically. By entering your name in the box above you are giving your authority for this application to proceed.

Section Two Accepted by Council Engineer: Yes No

Reason for declining (if applicable): _____

I confirm that I have reviewed the relevant information in this form, and that the required level of information has been supplied in order for the applicant to progress with this connection.

Signed: _____ Date: _____

Section Two Accepted by Water Engineer: Yes No

Reason for declining (if applicable): _____

I confirm that I have reviewed the relevant information in this form, and that the required level of information has been supplied in order for the applicant to progress with this connection.

Signed: _____ Date: _____

Please email your application to IM@wmk.govt.nz and copy in the Council Engineer (if applicable).

Section Three - Connection Process

The section is to be completed by the Water Unit on the day of the cut-in.

3.1 Pre-commencement checks

NOTE: Shut down CANNOT begin until ALL pre-commencement checks have been completed.

Water Unit Officer details

Name: _____

Contact phone number: _____

Water Unit to confirm that the site is prepared for cut-in including excavation works, dewatering, and shielding (if applicable).

Yes No

Comments/details:

Water Unit to confirm that the material and OD of the pipe to be connected on is correctly identified, and that all fittings to be installed are compatible.

Details for pipe to be connected onto		Confirmed by Water Unit
Material and OD of pipe:		
Flange size and flange pattern of pipe:		

List of key parts required		Confirmed by Water Unit	List of key parts required		Confirmed by Water Unit
1			6		
2			7		
3			8		
4			9		
5			10		

Comments/details:

Pre-commencement checks sign off

I confirm that I have made all pre-commencement checks before shut-down and that the identified pipework to join onto and fittings/parts to be installed are correct.

Signed: _____ Date: _____

3.2 Cut-in

NOTE: Water Unit to shut down water supply and depressurise the pipework so that the contractor can begin the cut-in. Water Unit to stand-over during these works.

Tick to confirm the Valve Plan for Water Shutdown has been followed.

Tick to confirm a Hygiene Audit has been completed.

Cut-in sign off

I confirm that I witnessed the contractor complete the cut-in and followed all protocol.

Signed: _____ Date: _____

3.3 Commissioning/Inspection

Water Unit to flush the new main/network in the correct order, flushing all fire hydrants and flush points (achieving a min 0.7m/s velocity).

Completed Not completed

Comments/details:

Water Unit to confirm that no debris or discolouration was present when flushing the new main/network.

NOTE: If debris or discolouration is present, Water Unit to inform Council Engineer who will require the applicant to complete sections 2.2, 2.3 and 2.4 again.

Pass Fail (Sections 2.2, 2.3, 2.4 to be repeated)

Comments/details:

Water Unit to confirm that all new valves (including fire hydrants, flush points, sluice valve, and service valves) on the main/network operate correctly. Also check that all sluice/service valves are **open** as per design.

Completed Not completed N/A

Comments/details:

Water Unit to check if there are any new boundary backflow devices installed on the new main/network, or if there are any backflow devices installed in future Council properties/reserves.

NOTE: If there are any backflow devices installed, Water Unit to test these devices through the backflow inspection program.

Installed None installed

Comments/details:

NOTE: List the number of backflow devices, the types, and their locations.

Commissioning and inspection sign off

I confirm that the new main/network has been commissioned and inspected, and that any issues have been documented and the appropriate Council Engineer has been informed of these issues.

Signed: _____ Date: _____

Section Three accepted by Council Engineer: Yes No

Reason for declining (if applicable): _____

Signed: _____ Date: _____

Section Three accepted by Water Engineer: Yes No

Reason for declining (if applicable): _____

Signed: _____ Date: _____