

Application for Water and Wastewater Capacity Check



A. Type of capacity check required:

Please indicate the type of capacity check required (*refer to guidance notes for explanations*)

Level 1
Preliminary capacity check

Level 2
Design capacity check

B. Applicant details:

Name: _____ Contact name: _____
(*company name if appropriate*) (*if different*)

Address: _____

Postcode: _____

Contact details:

Day: _____ Mobile: _____

Fax no: _____ Email: _____

C. Site details:

Site/project name: _____

Site address: _____

Postcode: _____

Please indicate type of development: Residential Commercial Industrial

Has planning permission been applied for? Yes No

Please state local planning authority: _____ Planning application no: _____

D. Development details:

Are **foul** flows to be connected to a public sewer? Yes No Datum at Lowest point on site (mAoD) _____

Residential: **number of properties to be connected** _____

Do you require a water supply? Yes No

Commercial: **estimated population to be connected** _____

Anticipated Peak Flow Rate _____

Industrial: **estimated maximum trade flow (l/s)** _____

Anticipated Continuous Flow Rate _____

Calculated foul sewer design flow (l/s): _____

(*As per Sewers for Adoption (6th edition)*)

Are **surface water** flows to be connected to a public sewer?

Yes No

If YES, please state the type of sewer:

Combined sewer Surface water sewer

Total Site Area (ha) _____

Estimate of impermeable area to contribute surface water flows (ha)

Estimate of peak surface water run-off in 2-year event (l/s)

(*As per Sewers for Adoption (6th edition)*)

If needing a non-standard connection (eg school, hotel, nursing home) please provide information on proposed fitting

Do you require a fire supply? Yes No

What type of equipment will be installed?

Hydrant Sprinkler Hose Reel

Required Flow Rate for this supply _____

E. Existing land use:

Does the site drain to an existing sewer?

Foul: Yes No

Surface Water: Yes No

Does the site have an existing connection to the water mains? Yes No

What is the present impermeable area? (ha) _____

Please provide brief description of existing land use _____

F. Proposed land use:

Please provide brief description of the development proposal (e.g. new build, conversion, number of properties)

G. Attachments

All applications should include the following: National Grid Reference of site _____

Area Map

Detailed Site Layout

* Site boundary clearly shown

* Preferred point of connection to public water system clearly shown

H. Charges (all charges are inclusive of VAT)

Level One Preliminary Capacity Check

Water supply or Wastewater flow:	
No of Units	Cost (£) inc. 17.5% VAT
0 to 50	158.63
51 - 250	477.05
251 - 500	636.85

Notes:
1. Under conditions where it is deemed necessary to carry out a full pumping station survey it is advised that discussions be held with Southern Water prior to submission of the form.

Surface Water Capacity Check:	
2Yr Flow (l/s)	Cost (£) inc 17.5% VAT
0 to 50	318.43
50 - 250	952.93
250 - 500	1,271.35

Notes:
For flows in excess of 500l/s it is advised that discussions be held with Southern Water prior to submission of this form.

Level Two Design Capacity Check

Water supply or Wastewater flow:		Surface Water Capacity Check:	
No of Units	Cost (£) inc 17.5% VAT	2Yr Flow (l/s)	Cost (£) inc 17.5% VAT
0 to 50	238.53	0 to 50	477.05
51 - 250	715.58	51 - 250	1,429.98
251 - 500	954.10	251 - 500	1,908.20
> 500	1,192.63	>500	2,385.25

Terms and conditions

Failure to include any of the requested information will be deemed as an incomplete application and may result in this application being delayed/returned. This application DOES NOT mean approval has been granted. No work should commence until written approval has been given by Southern Water.

Checklist and declaration

Drawings Correct Fee

Wastewater £ _____

Water Supply £ _____

Surface Water £ _____

Please make cheques payable to Southern Water Services Ltd

Total Fee Enclosed £ _____

Do you require a VAT receipt? Yes No

I confirm that to the best of my knowledge the information I have supplied is complete and correct.

Signature _____ Full Name _____

(BLOCK CAPITALS)

Date _____ Position _____

Please forward your complete submission to: Southern Water Services Limited,
PO Box 4056, Worthing, West Sussex, BN13 3XX