

Water Industry Registration Scheme Interim Authorisation Application

This application form is to be used by organisations who wish to apply for interim accreditation under The Water Industry Registration Scheme (WIRS). The Water Industry Registration Scheme has been developed to allow contractors, who fulfil the scheme requirements, to become registered as accredited Utility Connection Providers (UCPs*).

WIRS accreditation allows UCPs to carry out installation and commissioning of water mains with related service connections and service supply connections, relevant to their level of accreditation achieved, for later adoption by Scottish Water. The scope of activities that may be carried out by a UCP is set out in The Water Industry Registration Scheme (WIRS) requirements document. This document can be found at www.lloydsregister.co.uk

The Water Connections Code for Scotland

For accredited providers who will act as a UCP, a document is available which outlines the primary processes and requirements to undertake new connections work to a public water network. This document is titled The Water Connections Code for Scotland and can be found on the Scottish Water web-site.

Other Customer Connections applications available are:



For more information on Scottish Water, call our Customer Helpline on **0800 0778778** or visit our website at:

www.scottishwater.co.uk

Guidance section

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Who needs accreditation?

All UCPs who wish to undertake any part in the installation and commissioning of water mains and services to be adopted by Scottish Water including Project Management, Design and Construction need to apply for accreditation.

What is the difference between partial and full accreditation?

Partial accreditation is established as a means for contractors, who do not possess a track record in the water industry, to enter the UCP market. If a contractor possesses the competencies and method statements together with safe systems of work relevant to scheme requirements, which indicate that they could safely and competently perform the services for which they are seeking accreditation, then they could be awarded partial accreditation. This would enable them to bid for contestable work, within the water industry.

For further support please contact us as follows:

E-mail our team:

customerconnections@scottishwater.co.uk

Main office contact address:

Customer Connections
Scottish Water
The Bridge, Buchanan Gate Business Park,
Cumbernauld Road,
Stepps, G33 6FB

Main office phone number:

0800 3890379

Our main office operates 9am-5pm
Monday-Friday within business hours.



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Water**
Always serving Scotland

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Authorisation Criteria for competency approval with Scottish Water to operate as a Utility Connection Provider (UCP)

1. Application Details

Company Information and Details

Total number of employees:

Number of squad members:

(employees who will be seeking to obtain UCP accreditation)

Details of Parent Company (if applicable): _____

Details of subsidiaries, associates, joint ventures, etc. (if applicable): _____

Insurance Details

Public Liability/Employers Liability Insurer: _____

Limit of Indemnity (Public Liability): _____

Limit of Indemnity (Employer's Liability): _____
(Please provide photocopies of Certificates.)

Please list details of any significant insurance claims and any serious injuries or deaths in the last five years: _____

Please complete on separate sheet if necessary.

Quality Assurance

Are you a member of any Quality Assurance organisations, e.g. ISO 9000, Quality Guild, etc?

If so, please state name and furnish further details: _____

If not, please furnish written procedures for purchasing and controlling issue and use of materials on a separate sheet and give a short summary statement below:

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Gate 1

Interim applicants must be able to demonstrate registration Lloyds Register as part of the WIRS registration scheme and must demonstrate that any relevant employees are registered with Lloyds and working towards completion of the full scheme requirements as these apply to any role they wish to undertake.

Stage 1 Criteria: Applicants must show evidence of Awarding Body (e.g. Scottish Qualifications Authority, CABWI or similar) or a Recognised Training Provider Registration for Network Construction Operations (NCO) Water at the level required (i.e. S/NVQ levels 2 and 3).

Gate 2

Stage 2 Pre-requisite Criteria (Individuals are immediately eliminated if all of these are not in place):

1. National Water Hygiene Registration (EUSR)
2. Safety, Health and Environmental Awareness (SHEA) Water Registration (EUSR)
3. Scottish Water DOMS Registration with modules relevant to work being undertaken (EUSR)

Gate 3

Stage 3 Criteria: Evidence of Structured Training Programme Completion for any areas of work that are proposed to be undertaken during an interim authorisation activity:

- *Servicelaying Training by a recognised technically competent provider (e.g. City & Guilds 5831 scheme accreditation or equivalent).
- *Mainlaying Training by a recognised technically competent provider (e.g. City & Guilds 5831 scheme accreditation or equivalent).

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Subcontracting

Please indicate whether or not you intend to use contractors in any of the water related work that you engage in. They must be an Accredited UCP

Yes* No

* If yes, they will require to submit an application in their own right

Note: It is Scottish Water's policy that any work carried out for laying water mains should only be engaged by accredited Self Lay Organisations and for actual connections to Scottish Water's existing network, must be an accredited UCP.

Intended Scope of Works

Please indicate what scope of WIRs you are accredited for currently and/or are in transition towards accreditation, please list all.

Training Details

Please list all relevant training qualifications, in conjunction with WIRS requirements for both gate 2 and gate 3 criteria as per those outlined, for every person within your organisation who will be working as a UCP.

Name	Training Qualification	Date Attained

- Valve Operations Training by a recognised technically competent provider (e.g. City & Guilds 5831 scheme accreditation or equivalent).
- Pressure Testing Training by a recognised technically competent provider (e.g. City & Guilds 5831 scheme accreditation or equivalent).
- *Disinfection Techniques Training by a recognised technically competent provider (e.g. City & Guilds 5831 scheme accreditation or equivalent).
- Mains Flushing, Cleansing & Swabbing Techniques Training by a recognised technically competent provider (e.g. City & Guilds 5831 scheme accreditation or equivalent).

***Note:** For areas such as servicelaying, mainlaying and disinfection applicants must be able to demonstrate that their training history includes the elements that are specific to the work being undertaken e.g. electro-fusion jointing techniques, butt-fusions jointing techniques, mechanical jointing techniques, under-pressure connections (specific to the size of connection being undertaken), flow-proportional dosing for disinfection etc.

Gate 4

Stage 4 Criteria: Evidence of Quality Assurance (QA) accreditation, e.g. ISO 9000, Quality Guild

Gate 5

Stage 5 Criteria: As per the existing requirements of the SLO accreditation application.

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Health & Safety

Please enclose a written Health & Safety policy with your submission and sign the declaration within this form to confirm you adhere to these policies.

Company Work Experience

Please give details of relevant work experience undertaken under the current business name (up to 5 years, including dates, names, types of work, referees and contact details).

Date: / /

Location: _____

Pipe Length/Diameter Details: _____

Other Details: _____

Referee: _____

Tel: _____

Email: _____

Date: / /

Location: _____

Pipe Length/Diameter Details: _____

Other Details: _____

Referee: _____

Tel: _____

Email: _____

Authorisation

Must be provided by SW prior to any work commencing

Connection Activity

If authorisation is approved on an interim basis any UCP undertaking connection activities will be subject to a DOMS audit by SW staff on-site to evaluate working processes and procedures.

Please confirm Application

Pre-requisites

Please tick the following as appropriate and refer to the Authorisation Criteria:

1. Have you initiated WIRS Accreditation with Lloyds Register as per Stage 1 Criteria?
2. Have you registered with a training provider for the necessary training requisites as per.

Stage 2 Criteria?

- If yes please list the company name and contact details for the provider in the section below:
 - If no please explain further in the section below:
3. Can you provide evidence of a Structured Training Programme Completion as per the gate 2 and gate 3 Criteria?
 4. Can you provide evidence of Quality Assurance accreditation as per Stage 4 Criteria?
 5. Are you an Approved SLO with Scottish Water?

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Date: / /
Location: _____
Pipe Length/Diameter Details: _____
Other Details: _____
Referee: _____
Tel: _____
Email: _____

Date: / /
Location: _____
Pipe Length/Diameter Details: _____
Other Details: _____
Referee: _____
Tel: _____
Email: _____

Date: / /
Location: _____
Pipe Length/Diameter Details: _____
Other Details: _____
Referee: _____
Tel: _____
Email: _____

Date: / /
Location: _____
Pipe Length/Diameter Details: _____
Other Details: _____
Referee: _____
Tel: _____
Email: _____

Please copy and print this sheet as required.

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Personnel Details of all staff who are either Accredited or currently seeking Accreditation

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Water Industry Registration Scheme Interim Authorisation Application

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Water Industry Registration Scheme Interim Authorisation Application

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Name: _____

EUSR Number: _____

NI Number: _____

WIRS Accreditation Status and defined scopes: _____

Other qualifications/experience (NVQ, C&G, etc.): _____

Please copy and print this sheet as required according to size of your intended working squad.

Summary

Please ensure you have completed all sections of the application form and highlight that you have included any additional submissions in the checklist to the right. You should supply a copy of your insurance certificates, health and safety policy, and written quality assurance details if not a member of a registered quality assurance body.

If you have supplied additional information because there was not enough space on the application form, please also state this in the checklist.

If you have any questions regarding the application form please contact Customer Connections on 0141 355 5511 or UCPENquiries@scottishwater.co.uk

Water Industry Registration Scheme Interim Authorisation Application

Checklist

Please tick the box(es) for the submissions which you have enclosed with this application form.

- | | |
|------------------------------|--------------------------|
| Health Policy Document | <input type="checkbox"/> |
| Insurance Certificate | <input type="checkbox"/> |
| Quality Assurance Document | <input type="checkbox"/> |
| Additional Work Experience | <input type="checkbox"/> |
| Additional Personnel Details | <input type="checkbox"/> |
| Doms/NWHS Card Photocopies | <input type="checkbox"/> |

Declaration

I **declare** that the details submitted in this application form and supporting submissions are accurate, and that I have read and agree to the statements on Subcontracting, Scope of Works, Training and Health & Safety, as outlined in Policy Details.

I **also agree** to comply with the Water Connection Code of Practice and sign the Agreement between Scottish Water and the Accredited Entity, for each connection that I wish to complete.

Signed: _____

Print Name: _____

Date: / /

Position in organisation: _____

Registered Company Name: _____

Address: _____

Postcode: _____

Age of company: _____

Primary Contact for Application: _____

Name: _____

Position: _____

Tel: _____

Email: _____

Alternative formats of this form can be made available free of charge. For information on Braille, large print, audio and a variety of languages, please call our Customer Helpline.

If you have a disability, medical condition or other reason where you will need special assistance from Scottish Water then please contact us and we can add your name, address and special requirements to our confidential Additional Support Register.

We record all calls for quality and training purposes.

Please return pages 2–9 of this application to:

Customer Connections
Scottish Water
The Bridge
Buchanan Gate Business Park
Cumbernauld Road
Stepps
G33 6FB

SW UCP 01/13

