

**Application form seeking that a Group Water Supply Scheme be taken in charge by Irish Water under Section 95 of Water Services Act, 2007.**

*April2016*

***LOCAL AUTHORITY:***

In accordance with Section 95 of the Water Services Act, 2007. We the undersigned, being the representatives\* of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group Water Supply Scheme, hereby request the Take Over of the Scheme by Irish Water.

We make this application on behalf of the members of the Scheme, who have signed their consent and we confirm that the signatures on the attached consent forms are signed by the individual members of the Scheme.

We attach the following documentation in order to enable the application to be considered:

1. Fully completed application form, including schedule of assets and Wayleaves
2. Fully completed Consent forms signed by not fewer than 2/3 of the members of the Group Scheme
3. A connections listing setting out the names, correspondence addresses, connection addresses, category of connection etc.for each connection on the scheme.
4. As constructed drawings of the scheme as per Irish Water’s requirements
5. Wayleave agreements (where relevant)

We hereby declare that the accounts of the Group are up to date. We also confirm, to the best of our knowledge, that there is no money due by the Group to any person or body and that there are no outstanding claims against the group.

**Signed by:**

**Chairperson:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Secretary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Treasurer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\*Representatives can be committee members, Trustees, Board of Directors of Company or of Co-operative.

**Section 1 Scheme Summary Details**

|  |  |  |
| --- | --- | --- |
| **Item** | **Details to be provided** | **Answer** |
| Local Authority Scheme Reference Number | *Specific scheme reference Number ( if any) in Local Authority* |  |
| Name of Group Water Supply Scheme | *Local name for scheme* |  |
| If Scheme is set up as a Company or co-operative, please provide details |  |  |
| Scheme Contact Details for Chairperson | *Name, address and contact details of Group Scheme Chairperson* | Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Scheme Contact Details for Secretary | *Name, address and contact details of Group Scheme Secretary* | Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Scheme Contact Details for Treasurer | *Name, address and contact details of Group Scheme Treasurer* | Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Scheme Contact Details for Manager  | *Name, address and contact details of Group Scheme Manager, if one is in place* | Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Section 2 Background and Historical Information**

|  |  |
| --- | --- |
| **Item** | **Answer** |
| Outline details of when the scheme was originally constructed, extended and any other relevant historical information. |   |
| Were upgrades to the scheme carried out, with funding from Department of Environment? If so, please outline details |   |
| Does the Scheme claim an annual subsidy from the Local Authority? |  |

**Section 3 History of Taking in Charge application process to date**

|  |  |
| --- | --- |
| **Item** | **Answer** |
| Date of original or previous Application to the Local Authority to take the Scheme in charge. |  |
| Date the Scheme was initially assessed by the Local Authority for taking in charge |  |
| Date that Notice of Motion for taking in charge was approved by Members of the Local Authority or other commitment was made by the Council to take the scheme in Charge |  |
| Date that Manager’s Order to take Scheme in Charge was signed by County Manager /Chief Executive / Delegated officer |  |
| Who in Local Authority completed or will complete the assessment on the application to have Scheme taken in charge. |  |

**Section 4 Customer Information**

|  |  |  |
| --- | --- | --- |
| **Item** | **Details to be provided** | **Answer** |
| Has full list of connections been compiled | *Yes/No* |  |
| No. of Domestic Connections | *Total no. of* ***individual*** *connections to single domestic units.* |   |
| No. of non-Domestic Connections | *Total no. of* ***individual*** *connections to single Non-domestic units*  |   |
| Combined connections | *Total no. of connections serving a* ***combined domestic and non-domestic unit*** |  |
| Are there any significant users on the scheme  | *Yes / No**Details of volumes required* |  |

**Section 5 Current Billing Information**

|  |  |  |
| --- | --- | --- |
| **Item** | **Details to be provided** | **Answer**  |
| Are domestic customers billed by the Group Scheme | *Yes/No* |  |
| Are non-domestic customers billed by the Group Scheme | *Yes/No* |  |
| Are non-domestic customers billed by the Local Authority | *Yes/No* |  |
| Is the Scheme billed by the Local Authority on basis of a bulk meter | *Yes/No* |  |
| Frequency that bills are issues on bulk meter readings | *Monthly / Quarterly / Semi annually or annually* |  |
| Are there water charges due to the Local Authority at date of this application  | *Yes / No**How much* |  |

**Section 6 Technical Information**

|  |  |  |
| --- | --- | --- |
| **Item** | **Details to be provided** | **Answer** |
| Are as constructed drawings and Layout maps completed to Irish Water’s requirements. | Yes/No |  |
| Length in km | Total length of network to be taken over (excluding property connections) |  |
| Existing Sources | State if public or private source |  |
| Public Water Supply Zone to which scheme is connected | What is the name of the public water Supply Zone to which Group Scheme is connected?What is the WSZ EPA reference number |  |
| Is supply or part of supply Pumped | Yes/no.  |  |
| If supply or part of supply is pumped, please give energy details |  Electricity Account Reference numbers(MPRN) |  |
| Electricity Provider | Name of Electricity Provider |  |
| If there are pumping, what is average annual energy costs | This may be available on the annual subsidy applications |  |
| Electrical Meter Reading | To be recorded by GWS on an agreed date |  |
| If the supply is pumped, please provide details of pumps, number, model, valving, electrical details |  |  |
| Does the supply have a storage reservoir | Yes/No.  |  |
| If the Scheme has a storage reservoir, what is the capacity | Storage Volume (m3) |  |
| If the Scheme has a storage reservoir, please provide construction details | Construction type- Pre cast, RC, Steel , Other |  |
| **Item** | **Details to be provided** | **Answer** |
| Does supply have Chlorine Boosting | Yes/NoIf Chlorine Boosting and/or dosing then give details of dosing pumps, number, model, valving, bulk storage, electrical details, etc. to be supplied |  |
| Who currently maintains and repairs network | *Group Scheme members/ Contractor/ other arrangements (please provide details)* |  |
| Are maintenance records available (copy invoices) | *Yes/No* |  |
| What is the minimum cover for pipelines |  |  |
| Are all pipelines on Public Roads | *Yes/no* |  |
| If all pipelines are not on Public Roads, please state what length of pipelines are not on public road | *Off road length km* |  |
| Can networks be scoured effectively | *Yes/No* |  |
| Are there sufficient valves, fittings, sub-meters, marker posts etc on the scheme on the network | *Yes/No*  |  |
| Are all valves, fittings, sub-meters, marker posts etc operable and accessible | *Yes/No*  |  |
| Is the level of unaccounted for water (UFW) in network known  | *Yes/No* |   |
| What is the level of UFW |  |   |
| Is Scheme bulk metered | *Yes/No* |  |
| Water usage (m3/per km/ per hour), based on most recent usage data within last month | *Based on bulk metering or other data. Indicate basis of calculation* |   |
| Estimated annual water usage  | *Based on bulk metering or other data. Indicate basis of calculation* |  |
| **Item** | **Details to be provided** | **Answer** |
| Are all domestic connections metered and details provided on the Connections schedule attached  | *Yes/No* |  |
| Are non-domestic /mixed connections metered and details provided on the Connections schedule attached | *Yes/No* |   |
| Are pressure levels adequate throughout the network i.e. >= 1.5 bar | *Yes/No* |    |

**Section 7 Details regarding Assets and Wayleaves**

|  |  |  |
| --- | --- | --- |
| **Item** | ***Details to be provided*** | ***Answer*** |
| No. of Wayleaves | *No. of wayleaves on scheme, as listed on attached schedule* |  |
| Status of Wayleaves | *Status of Wayleaves – how many are various stages–Agreed, not in place or Pending* |  |
| Are there watermains on lands that are not covered by wayleaves | *Yes / No* |  |
| Land Acquisition Involved | *No. of Land acquisitions involved on scheme.* |  |
| Status of the Land Acquisitions Involved | *Status of Land Acquisitions– how many are various stages–Agreed, not in place or Pending* |  |

**Wayleaves Schedule**

**Group Scheme Ref No: \_\_\_\_\_\_\_\_\_ *LOCAL AUTHORITY:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Group Scheme Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reference No on Map** | **FOLIO No.** | **ADDRESS OF LANDS** | **Details of Transaction with Landowner** | **Details and Comments** |
|  |  |  | Owner Name |  |
|  |  |  | Postal Address of Lands  |  |
|  |  |  | Date wayleave documentation issued |  |
|  |  |  | Has wayleave been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|   |   |  |   |   |
|   |   |  |  Owner Name |   |
|   |   |  |  Postal Address of Lands  |  |
|  |  |  | Date wayleave documentation issued |  |
|  |  |  | Has wayleave been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  Owner Name |  |
|  |  |  | Postal Address of Lands  |  |
|  |  |  | Date wayleave documentation issued |  |
|  |  |  | Has wayleave been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |

**Wayleaves Schedule**

**Group Scheme Ref No: \_\_\_\_\_\_\_\_\_ *LOCAL AUTHORITY:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Group Scheme Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reference No on Map** | **FOLIO No.** | **ADDRESS OF LANDS** | **Details of Transaction with Landowner** | **Details and Comments** |
|  |  |  | Owner Name |  |
|  |  |  | Postal Address of Lands  |  |
|  |  |  | Date wayleave documentation issued |  |
|  |  |  | Has wayleave been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|   |   |  |   |   |
|   |   |  |  Owner Name |   |
|   |   |  |  Postal Address of Lands  |  |
|  |  |  | Date wayleave documentation issued |  |
|  |  |  | Has wayleave been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  Owner Name |  |
|  |  |  | Postal Address of Lands  |  |
|  |  |  | Date wayleave documentation issued |  |
|  |  |  | Has wayleave been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |

**LAND TRANSFER SCHEDULE**

**Group Scheme Ref No: \_\_\_\_\_\_\_\_\_ *LOCAL AUTHORITY:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Group Scheme Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reference No** | **Folio Number** | **ADDRESS OF LANDS** | **Details of Transaction with Landowner** | **Details and Comments** |
|  |  |  | Owner Name |  |
|  |  |  | Address of Owner  |  |
|  |  |  | Date Land Transfer documentation issued |  |
|  |  |  | Has Land Transfer documentation been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |
|  |  |  |  |  |
|   |   |  |   |   |
|   |   |  |  Owner Name |   |
|   |   |  |  Address of Owner  |  |
|   |   |  |  Address of Lands  |  |
|  |  |  | Date Land Transfer documentation issued |  |
|  |  |  | Has Land Transfer documentation been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  Owner 3 Name |  |
|  |  |  | Address of Owner 3 |  |
|  |  |  | Address of Lands 3 |  |
|  |  |  | Date Land Transfer documentation issued |  |
|  |  |  | Has Land Transfer documentation been signed | *Yes/No* |
|  |  |  | Has compensation been sought/paid | *Yes/No* |