



**Form B/02:
Metering activity carried out by an
Accredited Entity**

September 2015

Change History

Version Number	Date of Issue	Reason for Change	Change Control Reference	Sections Affected
Draft 20150714	14 July 2015	For pre-vendor MAP		All
ICP Housekeeping	25 August 2015	Non-material housekeeping changes	ICP/WRC/CP001	All
20150930	30 September 2015	For post-vendor MAP		

Form B/02: Metering activity carried out by an Accredited Entity

For use by Retailers

Notification of metering activity performed or to be performed by an Accredited Entity

To Water Wholesaler

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Copy to Sewerage Wholesaler, if relevant

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The purpose of this form is to capture the details required to support the metering Processes B2, B4, B6, B8 and B9 described in the Operational Terms. Under these processes Retailers notify the Wholesaler of metering activity to be carried out by an Accredited Entity following instruction from the Retailer registered to the Supply Point. The form should also be submitted where the Retailer wishes to withdraw a metering activity request or notice.

The form is divided into sections, as follows

Number	Section
1.	Retailer details
2.	Eligible premises details
3.	Reason for submission
4.	Notification of metering activity to be carried out / metering activity undertaken
5.	Details of work to be carried out by an Accredited Entity following instruction from the Retailer
6.	Consent to contact the Non-Household Customer
7.	Request for assistance from the Wholesaler
8.	Request for a financial contribution from the Wholesaler
9.	Withdrawal of metering activity request/notice
10.	Completion details
11.	Declaration

The relevant sections of the form should be completed and submitted to the Wholesaler in the following stages:

1. The Retailer, as applicable under the relevant process, notifies the Wholesaler in advance of metering activity to be carried out by an Accredited Entity following instruction from the Retailer (mandatory sections 1-6 and 11).
2. Where the metering activity has been carried out by an Accredited Entity following instruction from the Retailer, the Retailer provides the completion details (mandatory sections 1-4 plus sections 10 and 11).

Following stage 1, the form should be resubmitted where any of the following circumstances apply:

- the Retailer identifies the requirement for advance notification of the metering activity to the Wholesaler, in accordance with the relevant process, where this has not previously been provided (e.g. shared supply);
- the Retailer requests assistance from the Wholesaler (section 7);
- the Retailer requires a financial contribution for a meter installation due to non-standard circumstances (section 8);
- the Retailer wishes to withdraw the notice/request (section 9).

It should be noted that this document represents the version of the form contained in the Operational Terms and the form may be presented in alternative formats as appropriate (such as internet-based format); the content of the form will be as presented here. Mandatory information will depend on the stage of the process.

Mandatory means that the Retailer must provide the requested information wherever it applies to the particular request. If a piece of information does not exist or is not applicable in the circumstances, the Retailer must note this and, where relevant, provide a reason why it is not applicable.

1. Retailer details

Retailer name

Retailer ID

Retailer's own reference

Contact name

Contact number

Contact e-mail

2. Eligible premises details

SPID

VOA BA Reference, if available¹

UPRN, if available²

Address of eligible premises to be visited

Building number

Building name

Address line 1

Address line 2

Address line 3

Town

Postcode

Customer banner name

Is the address of the meter at which the metering activity is to be carried out the same as the address provided above?

Yes

No

If No, please provide details of the meter address below

.....

.....

.....

Postcode

¹ If not available please provide a reason

² If not available please provide a reason

Is there a Sensitive Customer at this Eligible Premises?

Yes

No

3. Reason for submission

Please indicate the reason for the request and complete the relevant section below

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | Notice to the Wholesaler in advance of metering activity to be carried out by an Accredited Entity following instruction from the Retailer | Please complete sections 4, 5, 6 and 11 |
| <input type="checkbox"/> | Request for Wholesaler assistance with metering activity being carried out by an Accredited Entity following instruction from the Retailer
Please provide the previous Wholesaler reference
..... | Please complete sections 7 and 11 |
| <input type="checkbox"/> | Request for a financial contribution from the Wholesaler
Please provide the previous Wholesaler reference
..... | Please complete sections 6, 8 and 11 |
| <input type="checkbox"/> | Completion details of metering activity carried out by an Accredited Entity following instruction from the Retailer
Please provide the previous Wholesaler reference (if applicable)
..... | Please complete sections 4, 10 and 11 |

4. Metering activity to be carried out (notification in advance) or confirmation of activity undertaken (completion)

Where the Retailer is notifying the Wholesaler in advance of undertaking the metering activity, the details of what is proposed will be as set out in section 4.

Where the Retailer is confirming the completion details of the metering activity undertaken, the details provided in section 4 will be the actual details of the activity undertaken and should be completed in conjunction with section 10.

Please indicate the metering activity that has been or will be carried out and complete the relevant section below

- | | | |
|--------------------------|---------------------|---|
| <input type="checkbox"/> | Meter installation | Please complete section 4.2 (Notifications in advance only) |
| <input type="checkbox"/> | Meter accuracy test | Please complete sections 4.1 and 4.3 |

<input type="checkbox"/>	Meter repair or replacement due to fault	Please complete sections 4.1 and 4.4
<input type="checkbox"/>	Change of meter	Please complete sections 4.1 and 4.5

4.1 Existing meter details

Please provide details of the existing meter (mandatory except for meter installation requests)

Meter serial number

Meter manufacturer

Meter size³

Where the meter has an associated combination, please provide the serial number of the associated meter

4.2 Meter installation *(Please also fill in Appendix A – Meter Size Data Assessment Sheet)*

Proposed meter details – only required for Notifications in advance

Proposed physical size⁴ of the meter to be installed

<input type="checkbox"/> 15mm	<input type="checkbox"/> 20mm	<input type="checkbox"/> 25mm
<input type="checkbox"/> 30mm	<input type="checkbox"/> 40mm	<input type="checkbox"/> 50mm
<input type="checkbox"/> 80mm	<input type="checkbox"/> 100mm	<input type="checkbox"/> 150mm
<input type="checkbox"/> 200mm	<input type="checkbox"/> 250mm	<input type="checkbox"/> 300mm
<input type="checkbox"/> 350mm	<input type="checkbox"/> 400mm	<input type="checkbox"/> 450mm
<input type="checkbox"/> 500mm	<input type="checkbox"/> 600mm	<input type="checkbox"/> 80 – 20mm
<input type="checkbox"/> 100 – 20mm	<input type="checkbox"/> Other	

If other, please specify

Model of meter to be installed (from the Wholesaler's meter menu).

Standard Non-standard

Wholesaler's meter menu reference

³ Nominal size of the meter in mm e.g. for a DN15 meter the Physical Meter Size is 15
⁴ Nominal size of the meter in mm e.g. for a DN15 meter the Physical Meter Size is 15

Please indicate the proposed location of the new meter.

- Inside building
- Outside building
- To be determined on survey

Please provide a description of the proposed location (where available)

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.....
.....

Please provide any additional information in relation to the request

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.....

4.3 Meter accuracy test

Please provide the reason for the meter accuracy test.

- Meter suspected to be over recording usage
- Meter suspected to be under recording usage
- Other
If other please specify

Please provide details of the model of the new meter to be installed, following removal of the meter to be tested

Model of meter to be installed (from the Wholesaler's meter menu).

- Standard Non-standard

Wholesaler's meter menu reference

Please provide any additional information in relation to the request

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.....

4.4 Meter repair or replacement due to a fault or other issue with the meter

Please provide details of the suspected nature of the fault at the meter.

- The meter has stopped recording
- The meter has slowed
- The meter is running backwards
- There is a burst / leak at the meter
- The meter is thought to be buried / tarred over but is still in situ
- The meter cannot be read due to smashed dials
- The meter cannot be read due to condensation
- The meter cannot be read due to electrical/battery fault
- Other
If other please specify

If the meter has stopped recording please provide the reading for the stopped meter

.....

Model of meter to be installed (from the Wholesaler's meter menu).

- Standard Non-standard

Wholesaler's meter menu reference

Please provide any additional information in relation to the request

.....
.....
.....

Are there any public health issues in relation to the request?

- Yes Please complete section 4.4.1
- No

4.4.1 Public health issues

Please confirm why this is a public health issue.

- No water at the premises
- Flooding at premises

4.5 Change of meter

Please indicate the reason for the change of meter.

- | | | |
|--------------------------|--|--|
| <input type="checkbox"/> | Change to a meter of the same size | Please complete section 4.2 |
| <input type="checkbox"/> | Change to a smaller meter (downsize) | Please complete sections 4.2 and 4.5.1 |
| <input type="checkbox"/> | Change to a larger meter (upsized) | Please complete sections 4.2 and 4.5.1 |
| <input type="checkbox"/> | Change to the location of the meter (relocation) | Please complete sections 4.2 and 4.5.2 |

4.5.1 Meter resize requests *(Please also fill in Appendix A – Meter Size Data Assessment Sheet)*

Please indicate if any additional information is supplied in support of the request

- | | | | |
|--------------------------|--------------|-----------|-------|
| <input type="checkbox"/> | Logging data | Reference | |
| <input type="checkbox"/> | Other | Reference | |

Please provide any additional information in relation to the request

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.....
.....

4.5.2 Meter relocation

Please indicate the proposed location of the new meter

- Inside building
- Outside building
- To be determined on survey

Please provide a description of the proposed location where available

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.....
.....

5. Details of work to be carried out by an Accredited Entity following instruction from the Retailer

Please provide details of the metering activity to be carried out by an Accredited Entity following instruction from the Retailer.

Please provide the proposed date on which the metering activity will be undertaken
..... (dd/mm/yyyy)

Please provide details of the Accredited Entity who will undertake the metering activity.

Accredited Entity name

Accredited Entity ID/reference

Will the work be carried out on a shared supply?

- Yes
- No
- To be determined on survey

Will the work require an interruption to the supply of services to other customers through the Wholesaler's Network?

- Yes
- No
- To be determined on survey

Will the proposed work impact on any Sensitive Customers? Please enter an X in the appropriate box

- Yes
- No
- To be determined on survey

Does the Wholesaler's Network Impact Assessment Form (often known as DOMS forms) require to be submitted to the Wholesaler in accordance with the applicable procedures?

- Yes (Please provide details below)
- No
- To be determined on survey

Wholesaler's Network Impact Assessment Form (DOMS form) Reference

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Additional information relevant to the Network Impact Assessment (DOMS) requirement

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5.1 Payment Application

Where the Retailer will be claiming, as applicable, a contribution from the Wholesaler for metering activity undertaken by an Accredited Entity, please indicate the applicable activities that will be undertaken in relation to the Supply Point in accordance with the relevant schedule set out in its Wholesale Tariff Document.

Wholesale Tariff Document contribution reference

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Description of metering activity

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6. Consent to contact the Non-Household Customer

The Wholesaler may wish to contact the Non-Household Customer to arrange a visit to the premises. Please indicate whether you give consent for the Wholesaler to contact the Non-Household Customer directly to arrange a visit to the premises.

Yes

Please provide contact details below

No

Customer contact details

Contact name at premises

Contact number

Please indicate if you want to be notified of the date of the visit

Yes

No

7. Request for assistance from the Wholesaler

Please complete the following where assistance is requested from the Wholesaler in relation to metering activity being carried out by an Accredited Entity following instruction from the Retailer.

Please provide the Wholesaler's reference number associated with the original notification.

Wholesaler's reference number

Please indicate if the assistance is required urgently, such as in relation to a public health matter

- Urgent
- Non-urgent

If urgent, please explain below

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.....
.....

Nature of assistance required

- Interruption to the Wholesaler's Network required
- Location of isolation valve
- Stuck isolation valve
- Other

If other, please explain below

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.....
.....

Please outline requirements below

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.....

8. Request for financial contribution in relation to specific circumstances encountered while undertaking the metering activity (where applicable)

This section should only be completed where the Retailer has previously provided a notice that it has undertaken a meter installation in relation to the Supply Point and there are circumstances which qualify for a financial contribution from the Wholesaler consistent with its Wholesale Tariff Document.

Please provide the Wholesaler's reference number associated with the original notification.

Wholesaler's reference number

Please confirm why there are non-standard circumstances in relation to the metering activity

- Access hindered
- Pipework modifications required
- Excavation required
- Traffic management required
- Other

Please provide any additional information in relation to the non-standard circumstances

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9. Withdrawal of metering activity request/notice

Please provide the Wholesaler's reference number associated with the original notification.

Wholesaler's reference number

Please provide the reason for withdrawal by placing an X in the appropriate box

- Costs
- Complexity of work
- No longer required
- Requested in error
- Other

If other, please explain below

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.....

Please provide any additional information in relation to the withdrawal

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.....

10. Completion details

This section is for the Retailer to confirm the completion details for the metering activity detailed in section 4.

Please provide the Wholesaler's reference number associated with the original notification where the metering activity has previously been notified in advance of completion.

Wholesaler's reference number

Please provide details of the Accredited Entity who carried out the work

Accredited Entity name

Accredited Entity ID/reference

Where the Retailer is claiming a contribution from the Wholesaler for metering activity undertaken by an Accredited Entity, please indicate the applicable activities undertaken at the Supply Point, in accordance with the schedule of rates in its Wholesale Tariff Document.

Wholesale Tariff Document contribution reference code

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Description of metering activity

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For metering activity details provided in section 4 please complete the relevant section below

- | | | |
|--------------------------|--|---|
| <input type="checkbox"/> | Meter installation | Please complete section 10.1 |
| <input type="checkbox"/> | Meter accuracy test | Please complete sections 10.1, 10.2 and section 10.5 if appropriate |
| <input type="checkbox"/> | Meter repair or replacement due to fault | Please complete sections 10.3 and sections 10.1 and 10.5 if appropriate |
| <input type="checkbox"/> | Change of meter | Please complete sections 10.1, 10.4 and section 10.5 if appropriate |

10.1 Completion of meter installation

This section is to be completed to record details of new meter installations following a meter installation, meter accuracy test, meter replacement due to fault and change of meter.

Please provide details of the meter that has been installed

Meter serial number

Meter manufacturer

Meter size⁵

- | | | |
|-------------------------------------|--------------------------------|------------------------------------|
| <input type="checkbox"/> 15mm | <input type="checkbox"/> 20mm | <input type="checkbox"/> 25mm |
| <input type="checkbox"/> 30mm | <input type="checkbox"/> 40mm | <input type="checkbox"/> 50mm |
| <input type="checkbox"/> 80mm | <input type="checkbox"/> 100mm | <input type="checkbox"/> 150mm |
| <input type="checkbox"/> 200mm | <input type="checkbox"/> 250mm | <input type="checkbox"/> 300mm |
| <input type="checkbox"/> 350mm | <input type="checkbox"/> 400mm | <input type="checkbox"/> 450mm |
| <input type="checkbox"/> 500mm | <input type="checkbox"/> 600mm | <input type="checkbox"/> 80 – 20mm |
| <input type="checkbox"/> 100 – 20mm | <input type="checkbox"/> Other | |

If other, please specify

Number of digits⁶ to provide reading to 1m³

Date of meter installation (dd/mm/yyyy)

Initial meter read

Please indicate the location of the new meter

- Inside building
- Outside building
- To be determined on survey

Meter location (GIS X)

Meter location (GIS Y)

Meter location description
.....
.....
.....

- Photograph of meter included

Please tick the box below if there is any data logging equipment attached to the meter

- Where data logging equipment is attached to the meter, please provide the details below

Please indicate the owner(s) of the data logging equipment by placing an X in the appropriate box

- Wholesaler

⁵ Nominal size of the meter in mm e.g. for a DN15 meter the Physical Meter Size is 15

⁶ E.g if a x10 meter, the number of digits that are required to read 1m³ is one more than the number of physical dials

<input type="checkbox"/>	3rd party (i.e. party other than the Wholesaler)
Datalogger make
Datalogger model/type
Datalogger serial number
Date of datalogger installation

10.2 Completion of meter accuracy test	
Meter removed should be as provided in section 4.1. The meter installed should be as provided in section 10.1.	
Date of meter removal (dd/mm/yyyy)
Final meter read (removed meter)
<input type="checkbox"/>	Photograph of removed meter included

10.2.1 Results of the accuracy test	
Please complete this section when the results of the test are available.	
Wholesaler's reference number
Please provide the results of the meter accuracy test	
<input type="checkbox"/>	Pass
<input type="checkbox"/>	Fail
<input type="checkbox"/>	Please confirm that the results of the meter accuracy test have been submitted to the Wholesaler.

10.3 Completion of meter repair of replacement due to fault		
Please confirm the outcome of your investigation into the fault at the meter		
<input type="checkbox"/>	No fault was found	
<input type="checkbox"/>	Meter has been repaired	Please complete section 10.3.1 in addition to this section
<input type="checkbox"/>	Meter has been replaced	Please complete section 10.1 and 10.3.2 in addition to this section
Nature of fault should be as provided in section 4.4		

10.3.1 Details of meter repair

Faulty meter should be as provided in section 4.1.

Please confirm the action taken to repair the meter

- Cleaned out mechanism
- Replaced dial/mechanism Please complete section 10.1 and 10.3.2 if the meter serial number has changed
- Replaced batteries
- Fixed a leak at join
- Meter (direction) turned around
- Meter dug up/exposed
- Meter height raised
- Other

If other, please specify

.....
.....
.....

Date of meter repair (dd/mm/yyyy)

Meter read at start of repair

Meter read at end of repair

- Photograph of meter before repair included
- Photograph of meter after repair included

10.3.2 Details of meter replacement

Meter that has been removed should be as provided in section 4.1.

Date of meter exchange (dd/mm/yyyy)

Final meter read (removed meter)

- Photograph of meter before repair included

Meter that has been installed should be as provided in section 10.1

- Please tick the box if the location of the installed meter is different from the location of the meter that has been removed

10.4 Completion of change of meter

Meter that has been removed should be as provided in section 4.1.

Date of meter exchange (dd/mm/yyyy)

Final meter read (removed meter)

Photograph of meter included

Meter installed should be as provided in section 10.1

10.5 Removed data logging equipment

Where a meter has been removed and where data logging equipment was attached to the meter please complete the details in this section.

Please tick the box below if there was any data logging equipment attached to the meter

Where data logging equipment was attached to the meter, tick the box and please provide the details below

Where data logging equipment was attached to the removed meter, please confirm the status of the data logging equipment on completion of the replacement of the meter

Data logging equipment removed and not replaced

Data logging equipment replaced with different data logging equipment

Data logging equipment transferred from the removed meter to the installed meter

Data logging equipment unaffected by the meter exchange/left in situ

Who owns the data logger?

Wholesaler

3rd party (ie other than the Wholesaler)

Datalogger make

Datalogger model

Datalogger serial number

Date of datalogger installation

11. Declaration

I hereby acknowledge and declare that the information provided in this form is correct and up to date at the date of submission

Signature

Date (dd/mm/yyyy)

Full name (in capitals)

Role in the company or job title

Appendix A – Meter Size Data Assessment Sheet

Please note this form is for use in assessing existing supplies and new supplies.

Where there is a new supply or supplies to a new Eligible Premises, proposed number of meters to be installed

.....

1. Site Information	Details of all available data items should be completed			
	Meter 1	Meter 2	Meter 3	Meter 4
Size of any existing meters or the design standard for new meters; as defined by - the value Q_3 (in m^3/hr), - the ratio Q_3/Q_1 , and - the value DN. Defined in BS EN ISO 4064-1:2014 Water meters for cold potable water and hot water. Metrological and technical requirements. (See note for older meters ⁷).				
Any existing meter serial numbers at the premises				
Supply pressure (Bar) if known				
Diameter of incoming pipe into building/premises (mm)				
Fire supply (Y/N) If YES, please complete section 4 – Fire Supplies				
Contaminated land (Y/N)				
Operational time period: please select all time periods that apply				

⁷ Older meters may not carry the newer designations (described above), and may carry the older meter designation used in BS 5728. In these cases the existing meter should be defined by:

- the value Q_n ,
- the Class letter (B, C or D), and
- the value DN.

Defined in BS 5728 Measurement of flow of cold potable water in closed conduits.

1. Site Information	Details of all available data items should be completed			
	Meter 1	Meter 2	Meter 3	Meter 4
00:00 - 08:00; 08:01-12:00; 12:01 – 18:00; 18:01 – 24:00 If no time period is selected, 24 hours will be used as the default				

2. Number of Water Fittings	Please provide details of the number of water fittings (as listed) and indicate whether they are fed from the mains or from a storage tank. If no information is available, please complete section 3 – Flowrate.							
	Meter 1		Meter 2		Meter 3		Meter 4	
Storage tank supply pipe size (mm)								
Maximum fill rate for storage tank l/sec								
	Mains	Storage	Mains	Storage	Mains	Storage	Mains	Storage
WC flushing cistern								
Domestic sized wash basin								
Commercial sized wash basin								
Bath (tap nominal size 20mm)								
Bath (tap nominal size larger than 20mm)								
Shower								
Power shower								
Sink (tap nominal size 15mm)								
Sink (tap nominal size larger than 15mm)								
Spray tap								
Bidet								
Domestic sized washing machine								

2. Number of Water Fittings	Please provide details of the number of water fittings (as listed) and indicate whether they are fed from the mains or from a storage tank. If no information is available, please complete section 3 – Flowrate.							
	Meter 1		Meter 2		Meter 3		Meter 4	
Domestic sized dishwasher								
Domestic sized waste disposal unit								
Commercial sized washing machine								
Commercial sized dishwasher								
Commercial sized waste disposal unit								
Outside tap								
Swimming pool capacity m ³ or max fill rate l/sec								
Water re-use system								
Water treatment unit								
Any other water fitting or outlet								
Description of plumbing work							

3. Flowrate	Where no information is available for the number of water fittings, please complete either section 3.1 or 3.2							
	Meter 1		Meter 2		Meter 3		Meter 4	
3.1 Existing supplies From Logging Data, if applicable Please note that this is not applicable to new connections	Please provide details of all three flowrates requested							
Minimum (l/sec)								
Maximum (l/sec)								
Typical (l/sec)								

3. Flowrate	Where no information is available for the number of water fittings, please complete either section 3.1 or 3.2							
	Meter 1		Meter 2		Meter 3		Meter 4	
3.2 New Supplies Estimate of Flowrate	Please provide details for the daily water requirement							
Daily requirement (l/day)								
Estimate of maximum flow rate (l/sec)								

4. Fire Supplies	Please provide details for the number of fire supplies and their estimated flowrates. Fire supplies may not be metered.							
	Meter 1		Meter 2		Meter 3		Meter 4	
Number of fire hydrants								
Estimated flowrate (l/sec)								
	Mains	Storage	Mains	Storage	Mains	Storage	Mains	Storage
Number of fire hoses								
Estimated flowrate (l/sec)								
Number of sprinkler system heads								
Estimated flowrate (l/sec)								
Fill rate for any tank if the fittings are not fed directly from the mains								

5. Meter Requirements	Please indicate whether there is power available at the site if a meter that requires power is being selected from the meter menu.							
	Meter 1		Meter 2		Meter 3		Meter 4	
Power available (Y/N)								