



Supply Name.....

Supply Reference.....

PRIVATE WATER SUPPLIES FORM

Q1. Full name and address of property supplied by the private water supply.	
Contact Name	
Company Name (if applicable)	
Address:	
Postcode:	
Telephone No (home/office):	mobile:
Email:	

Q2. Nature of premises/business
Please detail the purpose for which the premises are used such as private residence, public (e.g. community hall, church), commercial or industrial, production of food or drink for consumption (please state which type), restaurant or café, residential establishment (e.g. school, hotel, hospital, B&B, nursing home), holiday accommodation (e.g. campsite, caravan park, holiday homes), dairy or specify any other business.
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>
Period for which the premises are used for this purpose during the year _____ months/year

Q3. Maximum number of people supplied by the source per day at the premises (if applicable)	
Total number of occupants living in the premises	
Staff	
Customers/visitors	
Total	

Q4. Do you have any temporary events at the premises (e.g. music festival, air shows, performance of play or dance etc). If yes, please describe:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Estimated population at the temporary events		

Q5. Purpose for which the water is supplied
Please detail the purpose for which the water is used i.e. domestic purposes (e.g. drinking washing and cooking), production of food or drink for sale, washing crops (e.g. potatoes, apples), washing of equipment or surfaces which are in contact with final food product, supply of drinking water for employees or the general public (e.g. hotel, visitor centre) etc.
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>

<p>Q6. Please state the average daily volume of water used from the supply</p> <p>If you are unable to provide a meaningful estimate, we will assume 200 litres per consumer per day.</p>	<p>.....Litres / cubic metres / gallons</p> <p><input type="checkbox"/> This is an estimate</p> <p><input type="checkbox"/> This figure is calculated from meter readings</p> <p><input type="checkbox"/> I have no idea – please assume 200 litres / consumer / day</p>
<p>If the water is used for different purposes (e.g. domestic and agricultural (e.g. dairy, irrigation) please indicate an approximate estimate of the different amounts used for each purpose.</p>	

<p>Q7. Is the water supply to your property provided by another person?</p> <p>If yes please give the name and address of the person</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>Contact Name</p>		
<p>Company Name (if applicable)</p>		
<p>Address:</p>		
<p>Postcode:</p>		
<p>Telephone No.</p>		
<p>Email:</p>		

<p>Q8. If you answered yes to Q6 - Do you pay a charge for the supply of water (other than the abstraction license (Environment Agency)?</p> <p>If 'yes' please provide a copy of any agreement, contract or licence.</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
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<p>Q9. If you answered 'No' to Q6 - Is the water supply to your property also used by other properties (i.e. do you supply water to other premises)?</p> <p>If 'yes' please provide a list of the other properties on the supply</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>								
<table border="1"> <thead> <tr> <th>Address</th> <th>Ownership</th> <th>No of residents</th> <th>Purpose/Use of supply</th> </tr> </thead> <tbody> <tr> <td colspan="4" style="height: 200px;"></td> </tr> </tbody> </table>			Address	Ownership	No of residents	Purpose/Use of supply				
Address	Ownership	No of residents	Purpose/Use of supply							

Please use an extra sheet if necessary.

Q10. If you answered 'yes' to Q8. Do you receive a payment from the owners or occupiers of other properties concerned for the supply of water? If 'yes' please provide a copy of any agreement, contract or licence).	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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The Nature of the Supply.

Q11. Please indicate, if known, the nature of the supply e.g. Surface water – stream, river, dyke, ditch, pond, lake, reservoir Groundwater – borehole, well, spring etc Mixed – groundwater influenced by surface water	
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Please note - if the supply is influenced by surface waters it will sometimes change colour, temperature or quality after a heavy downpour.

Q12. Please describe the location of the source in relation to your property and of any intermediate storage tanks (and state grid reference if known).

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If possible, please use the additional information sheet to provide a diagram of the private water supply showing the source(s), premises supplied and any intermediate storage tanks.

Q13. Do you (or a suitable person) make inspections/checks of the supply source fittings and the reservoir/holding tank to ensure they are maintained and in good working order/watertight/vermin proof etc? If so please specify below and detail how often these inspections are carried out.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Q14. Is there any treatment of the private water supply: If yes, please indicate the type of treatment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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- Chlorination
- UV with pre-filter
- UV without pre-filter
- Flocculation
- Ozone
- Filtration: please specify
- Unknown
- Other: please specify

Who is responsible for managing the treatment system on a day to day basis.

Name.....

Position.....

Contact Tel:.....

Where is the treatment located with regards to the house and water source/storage?

Q15. Are the premises also served by a mains supply:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Q16. Do you have an abstraction licence from the Environment Agency	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, what is the licence number?		

Q17. Do you do your own monitoring of water quality	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please provide details of analysis undertaken over the last 2 years.		

Q18. To the best of your knowledge, are there any of the following located within 100 m of the supply source? (please tick all that apply)	
<input type="checkbox"/> Fuel tanks (incl. Heating oil tanks)	<input type="checkbox"/> Septic Tanks, pit latrines or sewage effluent lagoons
<input type="checkbox"/> Waste Disposal Sites (present or former)	<input type="checkbox"/> Disposal sites for animal remains (present or former)
Comments:	

Q19. To the best of your knowledge, are there any of the following located within 100 m of the supply source? (please tick all that apply)	
<input type="checkbox"/> Livestock grazing or housed	<input type="checkbox"/> Poultry rearing / housing
<input type="checkbox"/> Disposal of animal remains or other wastes or silage	<input type="checkbox"/> Spreading of slurry, sewage derived sludge or other organic wastes (incl. abattoir waste)
Comments:	

Q20. To the best of your knowledge, have any of the following activities ever taken place on any land within 100 m of the supply source? (please tick all that apply)	
<input type="checkbox"/> The application of pesticides	<input type="checkbox"/> Sheep dipping
<input type="checkbox"/> Any industrial activities	<input type="checkbox"/> Any pollution incidents, chemical spills etc
Comments:	

I am the owner / occupier / manager of the premises supplied by the private water supply named above.

Name: Signature

Address (if different to Q1.)

Postcode..... Telephone no.

Thank you for completing this form. The information provided will not be used for any other purposes than those associated with the private water supply.

Please return the form in the envelope provided to **Health and Environment, Ryedale District Council, Ryedale House, Malton, North Yorkshire, YO17 7HH. Tel: 01653 600 666 Email: envhealth@ryedale.gov.uk**

Additional Information: