

Form H/01: Request for an allowance to wholesale charges and/or a volumetric adjustment

For use by Retailers

To: D r Cymru Welsh Water

Number	Section	
1.	Retailer details	
2.	Supply Point details	
3.	Reason for the request	
4.	Fire fighting allowance	
5.	Burst allowance leading to a volumetric adjustment	
6.	Additional information	
7.	Consent to visit the eligible premises	
8.	Declaration	

Sections 1-3, 6-8 are mandatory. Complete other sections as indicated by section 3.

This form is available in Welsh on request.



1. Retailer details				
Retailer Name				
Retailer ID				
Retailers own reference				
Contact Name				
Contact number				
Contact e-mail				
2. Eligible premises details				
SPID				
Address of Premises				
Building number				
Building name				
Address line 1				
Address line 2				
Town				
Postcode				
Meter Manufacturer				
Meter serial number				
3. Reason for the request				
3.1 Type of allowance				
Please indicate the allowance being re	equested and complete the relevant section below			
Fire fighting allowance	Please complete section 4			
Burst allowance	Please complete section 5			
3.2 New or existing allowance				
Please indicate if this request is for a new allowance or a review to an existing allowance at this Supply Point				
☐ New allowance				
☐ Review to existing allowance				



4. Fire fighting allowance			
4.1 4.1.1	Volumetric charges Please provide the reason for the use of water in relation to the allowance request		
	Fire fighting		
	Testing fire fighting apparatus		
	Fire fighting training		
	Other, please specify		
4.1.2	Date and times on which the services were utilised for the purpose indicated above		
4.1.3	Volume reduction which is being applied for		
	m3		
4.1.4 In the case of fire-fighting training or testing fire-fighting apparatus, please provide meter reads from immediately before and after the testing or training			
	Meter reading before testing/training		
	Meter reading after testing/training		
If available, please provide logger data showing the period of use			
5. Burst allowance leading to a volumetric adjustment			
5.1	Please provide the reason for the allowance request		
	Allowance due to a burst between the meter and the property boundary where the meter is located outside the property boundary		
	Allowance due to a burst on the Non-Household Customer side between the supply and the meter as a consequence of negligence on the part of the Wholesaler		
	Other, please specify		
If contact was made with D r Cymru during the period of the leak, please provide the relevant reference number where available			



5.2 If avai	Please provide an actual meter read for Meter reading Date of meter reading lable, please provide logger data showing Estimated start date of burst				
5.4	Date of repair of burst				
6. Additional information					
Please provide any additional information in support of the allowance request. If supporting information is provided separately please list this below.					
7. Consent to visit the eligible premises					
D r Cymru may wish to visit the eligible premises for purposes such as to take a meter reading. Please indicate whether you consent for D r Cymru to contact the Non-Household Customer directly to arrange a visit to the premises consistent with the nature of the application.					
☐ Yes ☐ No					
Where consent is being given to contact the Non-Household Customer, please provide two points of contact at the site					
Conta	ct Name 1				
Conta	ct number and email address				
Conta	ct Name 2				
Conta	ct number and email address				
Please indicate if you want to be notified of the date of any visit					
☐ Yes ☐ No					



8. Declaration				
I hereby acknowledge and declare that the information provided in this form is correct to the best of my knowledge and up to date at the date of submission				
Your details				
Signature				
Date(dd/mm/yy)				
Full Name (in capitals)				
Role in the company or job title				