

Form I/02: Non-Household Customer temporary disconnection request performed by an Accredited Entity

For use by Retailers

To Wholesaler

This form should be used for Process I2: Temporary disconnection requested by the Non-Household Customer and performed by an Accredited Entity

The form is divided into sections as follows:

Number	Section
1.	Retailer details
2.	Supply Point details
3.	Water supplies
4.	Information regarding the viability of the disconnection
5.	Update following disconnection by an Accredited Entity
6.	Retailer Declaration

Sections 1- 4 and 6 are mandatory for the initial submission and Section 5 is mandatory following the disconnection.

1. Retailer details

Retailer Name

Retailer ID

Retailers own reference

Contact Name

Contact number

Contact e-mail

2. Supply Point details

SPID

Address of Premises

Building number / name

Address line 1

Address line 2

Address line 3

Town

Postcode

3. Water supplies

Type of Disconnection

☐ Temporary disconnection / restriction of water supplies

Number of supplies to be disconnected

Meter details for each supply to be disconnected - if more than 3 use additional sheet

	Meter 1	Meter 2	Meter 3
Meter Model
Meter Manufacturer
Meter Size

4. Information regarding the viability of the disconnection

As far as you are aware, do the water supply or supplies also supply any other premises (i.e. another Non-Household Customer or a Household Customer)?

- ☐ Yes provide details
- ☐ No

Is the occupier of the eligible premises a "Sensitive Customer" ² ?

- ☐ Yes
- ☐ No

² As defined in the Operational Terms – Part 3 of the Wholesale-Retail Code

As far as you are aware, will the disconnection affect the supply of water to premises that are listed in Schedule 4A of the Water Industry Act 1991?

- ☐ Yes
- ☐ No

Please provide the name of the Accredited Entity who will undertake the work

.....

Has the Accredited Entity carried out an initial visit to confirm that the disconnection may proceed?

- ☐ Yes
- ☐ No

If the disconnection has taken place on the initial visit, please indicate here ☐

5. Update following disconnection by an Accredited Entity

	Meter 1	Meter 2	Meter 3
Temporary disconnection (Y/N)
Date of Disconnection
Closing meter read

6. Retailer 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/yy)

Full Name (in capitals)

Role in the company or job title