

Application for the installation of a RPZ valve (type BA device)

Section 1: Postal address (or site) where the device is to be installed

Address			
Postcode			

Section 2: Installers contact details (if different to person commissioning/testing the device)

Installers name			
Address			
Postcode			
Telephone		Email	

Section 3: Contact information for the person onsite responsible for organising the initial commissioning/ongoing testing of the device

Site contact name			
Telephone		Email	

Section 4: Details of person commissioning/testing the device

Name			
Address			
Postcode			
Telephone		Email	
Testers Accreditation number			

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Section 5: Device details

Make/manufacturer			
Model number		Size	
Intended location (which part of the building) will the device be installed:			
Please state the type and use of the plant/equipment which the proposed device is to supply:			
Please supply the names/concentrates and material safety data sheets of any chemicals and substances that are proposed to be used downstream of the device:			
Please confirm the method of water supply to the device:			
Mains <input type="checkbox"/>	Storage <input type="checkbox"/>	Hot water <input type="checkbox"/>	Cold water <input type="checkbox"/>

Section 6: Schematic diagram

Please provide a plan of those parts of the premises to which the proposal relates, and a diagram showing the pipework (with sizes) and fittings to be installed. This should also give detail of the height and distance from any wall.



