

**APPENDIX C – WATER MAIN SHUTDOWN REQUEST FORM**



**Water Main Shutdown Request Form**

Location of Works  
(Plan to be provided)

Requested Date of Shutdown Day \_\_\_\_\_

Date \_\_\_\_\_

The proposed schedule is:

	Start	End
GVW Shut down		(Allow minimum 30 minutes)
Contractor works		(include draining, disinfection, connection, etc)
GVW Recharge mains		(Allow minimum 30 minutes)
<b>Total Time</b>		<b>Maximum of 4 hours</b>

Accredited Consultant \_\_\_\_\_

Project Manager \_\_\_\_\_ (Signature)

Contact No. \_\_\_\_\_

Accredited Contractor \_\_\_\_\_

Supervisor \_\_\_\_\_ (Signature)

Contact No. \_\_\_\_\_

Goulburn Valley Water Project Number (GLA) \_\_\_\_\_

The following approvals and requirements have been satisfied (delete as required)

Program Methodology Attached	Yes	No	Mandatory
Mains have been flushed, tested and disinfection	Yes	No	Mandatory
Asbestos Handling Procedures	Yes	No	NA
Traffic Management Plan	Yes	No	NA
Road Opening Permit	Yes	No	NA
WorkSafe Risk Assessment	Yes	No	Mandatory

Notes:

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