

# Application for Provisional Certificate of Operation



Please forward this form and attachments to **Developer Services, Icon Water** at:

**Email:** [hydraulicassetacceptance@iconwater.com.au](mailto:hydraulicassetacceptance@iconwater.com.au) or **Post:** 12 Hoskins Street MITCHELL ACT 2911

## Section 1 – Project Details

<b>Work Category:</b>	Minor	Major – Linear	Major – Complex
<b>Project Name:</b>			
<b>Project ID:</b>			
<b>Street Address (for In-Precinct):</b>			
<b>Suburb (for In-Precinct):</b>			
<b>Section/Block:</b>	Please fill in Section(s)/Block(s) on the back of this form.		
<b>Stage No. (for Out of Precinct):</b>			

## Section 2 – Submission and Certification Details

<b>Work-As-Executed Drawings:</b>	I hereby submit Work-As-Executed (WAE) records (including all relevant documents) as required by Icon Water Standards in both PDF and native file (e.g. dwg) format including sewer structure table in excel format. For Major Works, a Qualified Surveyor* was used for setout as well as accurate recording of WAE information throughout construction. CD or USB or email
<b>Inspections:</b>	I have inspected: The sewer mains and sewer ties as per design accepted drawings The water mains and services as per design accepted drawings
<b>Certification:</b>	I certify that: The above works have been constructed and tested in accordance with accepted plans, specifications and standards, and relevant test certificates are attached The works as constructed meet all the performance and service requirements of the design for which the original Certificate of Design Acceptance was issued The works have been completed and are ready for permanent connection I/We acknowledge the transfer of assets to Icon Water at the values stipulated in the Bill of Quantities
<b>Comments (if any):</b>	

## Section 3 – Constructor Sign-off Details (only for Minor Works)

<b>Name of company (if applicable):</b>			
<b>Name of Constructor:</b>			
<b>Postal Address:</b>			
<b>Telephone:</b>		<b>Mobile:</b>	
<b>Email:</b>			
<b>Sign-off (Constructor):</b>	Signature:		Date:

## Section 4 – Qualified Surveyor\* Contact Details (only for Major Works)

<b>Name of company (if applicable):</b>			
<b>Name of Qualified Surveyor*:</b>			
<b>Postal Address:</b>			
<b>Telephone:</b>		<b>Mobile:</b>	
<b>Email:</b>			

\* Qualified Surveyor as per STD-SPE-C-004 Survey and Tolerancing Requirements

