

Areas of Interest

COMPANY NAME

LCA REG. NO.

**DELETE [RULE through] those services which you do NOT offer  
--- TICK those services which you do offer**

**RED categories not deleted will be shown on the WebPage and you will be expected to have procedures for each of them**

**Each of the categories in red boxes will be shown on the Certificate of Registration, boxes will be charged at the rate shown on the Registration form**

*Please tick all applicable subsidiary areas of interest, they will be shown only on the WebPage*

**A** **Risk Assessment services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO  
Domestic  All system types

**B** **Water treatment services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO  
*Chemicals*  
*Dosing and or control systems*  
*Onsite analytical + monitoring services*

**C**  
**F**  
**G**

**H** **Hot and Cold water monitoring and inspection services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO

**I** **Cleaning and Disinfection services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO

**K** **Independent consultancy services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO

**L** **Training services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO

**M** **Off-site analytical services (micro) [UKAS mandatory]**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO

**Q** **Plant & Equipment services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO  
*Installation*  
*Refurbishment*  
*Servicing*  
*Design & Supply*

**R**  
**S**  
**T**  
**U**

**V** **Facilities Management services**  
In-house YES/NO sub-contracted YES/NO s/contractors LCA reg YES/NO

Do you have an Accredited Quality Assurance system **relevant to water treatment**? Yes / No:

QA details \_\_\_\_\_

**Signed:**

**Print Name:**

**Date:**