

# Electrical Network Access Request



Reference Number

## 1 Requestor Details

Name	<input type="text"/>	Email	<input type="text"/>
Company	<input type="text"/>	Phone	<input type="text"/>
Date Submitted	<input type="text"/>	Date Amended	<input type="text"/>
Scope owner:	<input type="text"/>	If other – scope owner (company)	<input type="text"/>

## 2 Notification Period

More than 2 weeks' notice prior to work: Escalation not required (go to section 7.2) [NOTE: Allow sufficient time for the request to be approved by your MTS representative and ensure that your approved request is received by [ecelec@metrotrains-sydney.com.au](mailto:ecelec@metrotrains-sydney.com.au) at least 2 weeks prior to work]

Less than 2 weeks' notice prior to work: Approval required through late scope process (complete below)

## 3 Planned times for Start of Work/Permit Issue

From	Time:	<input type="text"/>	Date:	<input type="text"/>	To	Time:	<input type="text"/>	Date:	<input type="text"/>
		No. of Permits Required:	<input type="text"/>						
		Primary Work Location (suburb / landmark):	<input type="text"/>						
		Multiple outages required on sequential days:	Yes	No			Date of final isolation:	<input type="text"/>	
		<i>Must be identical outages and times</i>							
		Number of separate outages:	<input type="text"/>						

## 4 Work Details

Brief work scope:

Detailed description of work (scope):

Plant to be used:

Onsite Contact:  Onsite Contact (phone):

Onsite Company:  Email:

Does this work involve a configuration change? Yes  No  N/A  CCR No.

CCR approved Yes  No  Pending  CCB date:

Will this work impact on downstream equipment? Yes  No

Downstream equipment details:

**5 Electrical network outage**

Electrical network outage is NOT required for this work (go to section 6)

Electrical network outage is required for this work (go to section 5.2)

**5.2 1500V OHW**

FROM OHW Structure		TO OHW Structure		Track Name
Prefix	KM+MMM	Prefix	KM+MMM	List track names, "All Tracks" not accepted

Rail connecting points? (indicate fixed or portable)

OHW Testing? Yes  No

**5.3 HV and Substation equipment**

From substation:

To substation:

HV Testing? Yes  No

Equipment numbers from which supply is to be removed:

Equipment requiring isolation

Isolation points required

Earthing (rail connecting) points required

Other Network Operators' services from which supply is to be removed

**5.4 Permit Holders**

Permit Holder name	Phone	Permit Holder name	Phone

Preferred location for permit issue:

Number of permits required:

**5.5 Electrical network change**

Electrical network change? Yes  No

Detailed description of network change:

Proposed Electrical Operating Diagram submitted? Yes  No  Comments:

All requests: once completed, this form is to be submitted to your MTS representative.

**6 Approvals / Endorsement**

Role	Name	Date	Approval	Comments	Signature
MTS Representative Asset Manager or Interface Manager (all requests)			Approved		
			Rejected		

**Electrical Requests:** MTS representative to submit Electrical requests to Electrical Network Manager or Infrastructure Manager

Electrical Network Manager or Infrastructure Manager			Approved		
			Rejected		

**Track access required:** MTS representative to submit this form to [mtspossessions@metrotrains-sydney.com.au](mailto:mtspossessions@metrotrains-sydney.com.au)

Possessions (track access only)			Approved		
			Rejected		

**Electrical Requests:** once approved, this form is to be emailed to; [ecolec@metrotrains-sydney.com.au](mailto:ecolec@metrotrains-sydney.com.au) for preparation of electrical switching programs.

**7 Approval comments**

Include details in traffic notice – possessions team use only.

**If using Adobe Sign to request signatures (Preferred)**

Enter in order:

- MTS Representative
- Electrical Network Manager
- MTS Possessions Team Member

This will automatically add the signature boxes in the correct locations