

Register Receipt #:

HYDRANT FLOW METER APPLICATION 2018

Bars Code: 0750 / 401.237.104

•	•			
Project N	umber:		Project Name:	
Project A	ddress:			
Hydrant L	ocation:			
APPLIC	ANT INFO	RMATION:		
Business N	Name:		Fax #	
Contact P	Person:		Phone #	
Email:			Cell #	
Billing Ad	dress:			
Mailing Ad	ddress:			
	Fees:	\$1,800.00	Deposit for water flow meter assem	ibly
	1 003.	\$334.26	Base fee for water usage per month	

Fees: \$1,800.00	Deposit for water flow meter assembly
\$334.26	Base fee for water usage per month
\$2.02	Per 100 cf up to 1,000 cf of water used
\$2.64	Per 100 cf for 1,001-2,000 cf of water used
\$3.16	Per 100 cf for >2,000 cf of water used
BILLED ON A MONTH	LY BASIS per the yearly fee schedule & utility rate

This permit authorizes water removal from this hydrant location only and may not be used for any other location.

- I understand, that the use of this meter and water is subject to the same collection and lien procedures under the law that regulates the water districts as provided in Sumner Municipal Code 13.24.
- I understand that the City of Sumner is not responsible for water quality after it leaves the City of Sumner hydrant and I agree to hold the City of Sumner harmless for any water quality problems that may occur after the hydrant.
- I further agree to protect the meter and the service where meter connects against damage and assume financial responsibility for the repairs made by such damage, or theft or loss of meter.
- In the event of failure to pay the billing in the time specified above, the below signed agrees to pay all costs of collection, including reasonable attorney fees and costs. If signing as a corporate official, the below signed agrees to be personally liable for the billing.

Authorized Applicant Signatur		Date:						
Public Works Engineer Appro	val:			Date:				
For Office Use								
Hydrant Meter Location:								
	Ending Read	:	c.c.f					
Meter Serial #	Initial Read:	Initial Read:		c.c.f				
	TOTAL USA	AGE:	c.c.f					
Installed by:	Date:	e: Condition:						
On-side project personnel:								
On-site contact number:								
Removed by:	Date:		Condition:					
RECORDS SECTION	N CHECKLIST	INITIAL	DATE					
Forward to PW Sho	ps							
Forward to PW Spee	cialist							
Forward to Finance								