

Application for Meter Permit

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| Application is hereby made for permission to (Check One): <input type="checkbox"/> Set New Meter <input type="checkbox"/> Disconnect and Reset <input type="checkbox"/> Break Seal <input type="checkbox"/> Permanently Remove Meter <input type="checkbox"/> Replace Meter | Property Description Block: _____ Lot: _____ Property Address: _____ City/State/Zip: _____ _____ _____ | | |
| Information about Meter to be Removed/Repaired/Replaced Meter Size: _____ Type: _____ Manufacturer: _____ Meter Number: _____ Meter Location: _____ Tap Size: _____ Service Size: _____ Reason for work being done: _____ _____ _____ | Information about New Meter (Complete if available) Meter Size: _____ Type: _____ Manufacturer: _____ Meter Number: _____ _____ _____ | | |
| Which part of building is covered by the meter? Building occupied as: _____ Dept. of Buildings New Building #: _____ Alteration #: _____ | | | |
| Is this work being performed under the Reimbursable Metering Program? <table style="float: right; border: 1px solid black;"> <tr> <td style="width: 100px; text-align: center;">Yes</td> <td style="width: 100px; text-align: center;">No</td> </tr> </table> | | Yes | No |
| Yes | No | | |
| "I authorize the licensed plumber named below to do the work described in this application." Name of Owner: _____ Signature of Owner or Agent: _____ Date: _____ Mailing Address: _____ City/State/Zip: _____ Telephone: () _____ | | | |
| "I certify that I am authorized by the owner of the premises to do the work described herein." Name of Applicant (Licensed Plumber): _____ Signature of Licensed Plumber: _____ Application Date: _____ Mailing Address: _____ City/State/Zip: _____ License No.: _____ Plumber's CIS Acct #: _____ Telephone: () _____ | | | |
| For Office Use only: Premises Account Number: _____ Plumber Account Number: _____ Permit Type: _____ Permit Number: _____ Fee: _____ Date Issued: _____ Issued By: _____ | | | |