



The Metropolitan District

Year 2011

Application and Tracking Document for Installation of a Temporary Hydrant Meter

MDC Application Number: **2011-**

This section to be filled in by Applicant

Name: _____
 Address: _____ Date: _____

 Anticipated Installation Date: _____
 For what purpose will meter be used? List all uses. Expected Removal Date: _____

Road/Construction Contractor Irrigation/Farming
 Landscape Contractor Other (specify) _____

Location where meter will be installed: _____ street
 _____ nearest intersecting street
 _____ Town

Work Phone# : _____ 24 Hour Emergency # : _____
 Cell Phone # : _____ Fax # : _____
 email address: _____ Preferred phone # during day: _____

Signature of applicant Certifies that applicant has read and will comply with Public Health Code Cross Connection Regulation 19-13-B37, 19-13-B38a and District guidelines for safe operation of hydrant use. Applicant **MUST** notify The Metropolitan District prior to removal of hydrant meter.

Signed by: _____ Date: _____
Customer signature

This section to be filled in by Command Center/Customer Service Department:

Date: Meter Number: Initial Meter Reading:

Non-refundable \$1000 permit/inspection fee, plus an additional \$1500 hydrant meter deposit

Number: Document number:

Signed by: _____
Manager of Customer Services or Designee

This section to be filled in by Cross-Connection Liaison/Technician (if backflow prevention is required)

Date of Test: _____ Installed by: _____
 Tag # _____

Did device pass test? YES NO

Approved for Use: _____ Date: _____
Cross-Connection Technician/Liaison

Approved moving of hydrant meter:

Date: _____
 Location to: _____ street
 _____ nearest intersecting street
 _____ Town