



# The Metropolitan District

Year **2026**

## Application and Tracking Document for Installation of a Temporary Hydrant Meter

MDC Application Number: **2026-**

### ***This section to be filled in by Applicant***

Name:

Address:

Date:

Anticipated Installation Date:

Expected Removal Date:

For what purpose will meter be used? List all uses.

☐

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 Customer Service Department:***

Date:  Meter Number:  Initial Meter Reading:

Non-refundable \$1500 permit/inspection fee, plus an additional \$3250 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