CITY OF ELGIN HYDRANT METER AGREEMENT

COMPANY INFORMATION

COMPANY NAME: _____

STREET: _____ CITY: _____

ST.: _____ ZIP: _____ PHONE: (_____) _____ - _____ EXT: _____

JOB LOCATION: _____

CITY CONTACT NAME (for city project) _____

ALL METERS MUST BE RETURNED TO THE METER SHOP LOCATED AT 2 SLADE AVENUE BEFORE NOVEMBER 1st, UNLESS PRIOR ARRANGEMENTS ARE MADE.
CLOSED FOR LUNCH FROM 12:00-1:00PM.
THE CUSTOMER HEREBY UNDERSTANDS AND AGREES THAT IT WILL BE RESPONSIBLE FOR ANY THEFT, LOSS OR DAMAGE TO THE METER AND ALL WATER USAGE INCURRED.

DATE RECEIVED ____ / ____ / ____ _____ _____
CUSTOMER SIGNATURE PRINT NAME

_____
CITY EMPLOYEE SIGNATURE

DATE RETURNED ____ / ____ / ____ _____ _____
CUSTOMER SIGNATURE PRINT NAME

_____
CITY EMPLOYEE SIGNATURE

METER INFORMATION (office use only)

3 - IN. = $335.54/Month or $11.18/Day for as long as the meter is out.

SERIAL NO.: _____

READ: START: _____100 CU. FT. ENDING: _____100 CU. FT.

TOTAL 100 CU. FT.: _____ X 748 = _____GALLONS

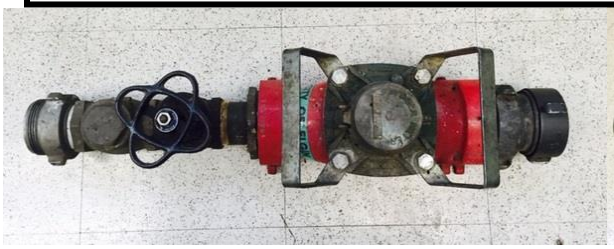
DEPOSIT INFORMATION (office use only)

3 – INCH METER		$ **1600.00**
WATER (1 Month Estimated Usage)		$ **300.00**
HYDRANT WRENCH	$50.00	$_____
TOTAL DEPOSIT		$_____

CITY CONTRACT _____ YES _____ NO

BILLABLE USAGE _____ YES _____ NO

CHECK NO. _____

ROUTE TO:

_____ WATER BILLING
_____ WATER ACCOUNTABILITY (non-chargeable accounts)