

RECYCLED T-METER APPLICANT INFORMATION FORM



METER SIZE REQUESTED	INSTALLATION FEES (NON-REFUNDABLE)	DEPOSIT	CONSTRUCTION FEES (NON-REFUNDABLE)
2 ½"	\$372	\$600	TBD
4"	\$0	\$0	\$3,794
6"	\$0	\$0	\$4,053

WO#: _____ CO#: _____ SPEC#: _____

**DO NOT SUBMIT PAYMENT PRIOR TO T-METER APPROVAL.*

***SERVICES NOTED AS SUCH ARE BILLED AT ACTUAL COST FOR THE 2.5" T-METER ONLY. IF THE ACTUAL COST IS LESS THAN THE DEPOSIT AMOUNT, A REFUND WILL BE INITIATED.*

RESPONSIBLE PARTY

APPLICANT TYPE: <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> DEVELOPER <input type="checkbox"/> COMMERCIAL NON-POTABLE WATER HAULER	LICENSE NO. _____ EXPIRATION: _____ <input type="checkbox"/> OTHER: SPECIFY _____
BUSINESS NAME:	TAX ID:
BILLING STREET ADDRESS:	BILLING CITY, STATE, ZIP CODE:
PRIMARY BILLING CONTACT NAME:	
PHONE NUMBER:	EMAIL ADDRESS:

FIELD CONTACT INFORMATION

PRIMARY FIELD CONTACT NAME:	
PHONE NUMBER:	EMAIL:
ASSIGNED INSPECTOR:	WO#:

PROPERTY DETAILS – LOCATION WHERE WATER WILL BE USED

<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> PUBLIC
OWNER'S NAME:	PHONE:	
PROPERTY ADDRESS:	CITY, STATE, ZIP CODE:	
APN:	TRACT #:	

PROJECT INFORMATION

PROJECT NAME:	CITY PROJECT IS IN:
RECYCLED WATER USE INFORMATION (CHECK ALL THAT APPLY) <input type="checkbox"/> GRADING <input type="checkbox"/> DUST CONTROL <input type="checkbox"/> COMPACTION <input type="checkbox"/> PRE-WETTING (PRIOR TO GRADING) <input type="checkbox"/> STREET SWEEPING <input type="checkbox"/> OTHER RECYCLED WATER APPROVED USE – SPECIFY: _____	

**REFER TO THE FULL TEXT OF TITLES 22 AND 17 CALIFORNIA CODE OF REGULATIONS STATE BOARD, DIVISION OF DRINKING WATER, RECYCLED WATER REGULATIONS.*

***REFER TO THE FULL TEXT OF EMWD'S BEST MANAGEMENT PRACTICES AND ADMINISTRATIVE STANDARDS.*

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PROJECT INFORMATION CONTINUED		
WATER IS CONVEYED BY: <input type="checkbox"/> TRUCK <input type="checkbox"/> TOWER <input type="checkbox"/> HOSE		
HOW MANY VEHICLES WILL DRAW WATER?		
ANY OTHER EXISTING T-METERS FOR THIS PROJECT? <input type="checkbox"/> YES <input type="checkbox"/> NO		
BLOW-OFF LOCATION OR VALVE NUMBER FOR T-METER INSTALLATION:		
HOURS OF OPERATION:	DAYS OF OPERATION:	END SERVICE DATE:

The Applicant is responsible for payment of water bills and any damages to EMWD facilities resulting from Applicant’s connection, use, and disconnection to the meter or blowoff assembly. I acknowledge and agree to comply with all EMWD Administrative Code, Ordinances, Policies, and Rules. I agree to use of the temporary meter in a way that will not create a threat to public safety or property. Indemnification of EMWD from any and all responsibility for public liability and/or property damage and personal injuries which may result from the Applicant's use of the meter and blowoff assembly. Such indemnification shall include all legal costs incurred by EMWD. I understand that this application is for temporary recycled water (through a construction meter) for the sole purpose of construction work at the address/location stated above. I further understand EMWD has the right to remove the construction meter without prior notice if the meter is used in an improper manner or for non-approved uses. By signing below, I hereby certify that I have read and examined the information provided to be true and correct.

Signature:	Date:
Name:	Title:

OFFICE USE ONLY			
CUSTOMER NAME:		ACCT #	
ADDRESS:		CITY:	ZIP CODE:
LEGAL DESCRIPTION:			VALVE #
GEO CODE LAT:		GEO CODE LONG:	
WATER RATE CODE: RC42	WATER ID: 98	Tenant Type: <input type="checkbox"/> TU <input type="checkbox"/> TV <input type="checkbox"/> TW	
ROUTE #		RECEIPT #:	MAXIMO:
<input type="checkbox"/> CONSTRUCTION TO PICK UP METER FROM METER SHOP		APPLY TM2.5SA98 <input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> RECYCLED GROUP TO PICK UP METER		2.5"	4"
<input type="checkbox"/> METERS DEPARTMENT TO INSTALL METER		6"	
COMMENTS:			