APPLICATION FOR SECOND METER

In order for the City of Chillicothe to promptly process your request for a second meter, please supply the following information

GENERAL INFORMATION

APPLICANT NAME: _____ PROPERTY OWNER: _____

ADDRESS: _____ ADDRESS: _____

TELEPHONE: _____ TELEPHONE: _____

Address where meter will be installed: _____

METER INFORMATION

Meter Size: ¾ " 1" 2"
Circle one

Location where second meter will be placed: _____

Name of person installing meter: _____

Purpose of Second Meter: _____

I, the undersigned hereby request a second meter. Attached is the non-refundable application fee of $10.00. My signature indicates that I have read, understand, and agree to all of the provisions and regulations for installing a second meter detailed in Chapter 98 – Utilities, Section 82 of the City of Chillicothe Code Book.

_____ _____
Applicant Signature Date

~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~Official Use Only~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

I, the undersigned, hereby acknowledge that I have inspected the installation of the above mentioned second meter and hereby approve that the craftsmanship meets or exceeds the required standards for a second meter as described in Chapter 98 – Utilities, Section 82 of the City of Chillicothe Code Book.

_____ _____
Public Works Employee Date

_____ _____
Superintendent of Public Works Date

Application Fee: $10.00 ¾" Meter/backflow Charge: $227.00 1" Meter/backflow Charge: $351.00
Paid: Check _____ Cash _____ Date: _____
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