

## The Corporation of the Town of Fort Erie 1 Municipal Centre Drive Fort Erie, Ontario, L2A 2S6

Telephone: 905-871-1600 Facsimile: 905-871-6411 www.forterie.ca

## **APPLICATION FOR WATER METER**

PROPERTY INFO	RMATI	ON							
Street Name:				House No. /	Lot No.:				
Concession or Pl	lan No:								
Description of Lo	ocation:		(i.e. North/South/East/West Side of Road and/or near intersection and/or next to)						
Owner Name:									
Owner Address:									
Owner Telephor	ne:			Email:					
Applicant Name: (If different than		.)							
Applicant Addres	ss:								
Applicant Teleph	none:			Email:					
ACKNOWLEDGE									
BY MY SIGNATURE BELOW, I HEREBY AGREE TO PAY ALL FEES IN ADVANCE AND WHERE THE TOWN COSTS EXCEED ANY DEPOSITS, I HEREBY AGREE TO PAY BALANCE WITHIN THIRTY (30) DAYS FROM DATE OF INVOICE. I ALSO, HEREBY AGREE TO HAVE THE WATER METER AND REMOTE READER INSTALLED BY AN APPROVED PLUMBER.									
Signature of Owner/Applicar	nt:								
Date:									
CONDITIONS OF	PERMI	T APP	LICATION SUBMISSION						
Please allow <b>five (5) business days</b> before picking up meter. Meters are to be picked up at the <b>Gibson Centre</b> , <b>1818</b>									
Pettit Road, Fort Erie, ON L2A 5M4.									
A flat fee will be paid upon submission for application of building permit. This fee covers the cost of water used during new construction for a maximum period of <b>90 day</b> s after the issuance of the building permit. You will need to contact the Building Department to arrange for the certification of the meter. Should certification not be done prior to this date, the monthly flat rate fee for water and sewer will be applied.									
FOR OFFICE USE ONLY									
Application			New Meter	Roll Number:					
Purpose:			Meter Replacement	Account Number:					
					Meter(s)	Requested:			
		_	Water and Sewer			-			
Account Type:			Water						
			Sewer						
FEE CALCULATION									
Pit Required:	<u> </u>			Amount:					
Other:				Amount:					
				Sub Total:					
				HST (13%):					
				Grand					
				Total:	1				



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METER DETAILS (TO BE COMPLETED BY TOWN OF FORT ERIE WATER/WASTEWATER DEPARTMENT)											
BUILDING DEPARTMENT											
METER REQUESTED:										COST:	
UTILITIES – WATER/WASTEWATER											
Serial Number:		Register ID:									
				Com	pleted E	Зу:					
METER PICK-UP											
Pick Up Date:					Picked Up By:						
					Registered By:						
METER CERTIFICATION											
Seal No:			Reading:					Date:			
			Cert	ified By:							
CORPORATE SERVICES – WATER BILLING											
Meter ID:			Proc	essed By	<b>/</b> :						