

RESET FORM



6265 N. LA CANADA DR.
P.O. BOX 36870
TUCSON, AZ 85740-6870
(520) 575-8100

APPLICATION FOR WATER SERVICE

Name on Account: _____
Service Address: _____
Service Zip Code: _____ Community Gate Code (if appl.): _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Contact: _____ Contact Phone: _____
(If Different from Name on Account)
Subdivision/Project: _____ Bldg./Lot No.: _____
Meter Type: _____ Meter Size: _____
(All non-residential meter applicants and private well owners are required to install private backflow prevention, and shall be inspected and approved by Metro Water prior to activation).
A final inspection of the water meter and related appurtenances will occur after occupancy and prior to any transfer of water services. Please see the reverse for more details.
Waste Connection Type: Sewer Septic N.A. (for irrigation)
Location of Existing Service/Meter Box: Along Street/Right-of-Way Easement/Rear Alley
Private Service Material: _____
Private Service Size: _____
Provide street name meter location if different from service address: _____

The applicant acknowledges the above information is accurate at the time of application, and assumes responsibility for any additional costs or delay during installation if an existing service or meter box no longer meets District specifications.

OFFICE USE ONLY (FEES ARE BASED ON METER SIZE SELECTED)

METER FEE..... \$ _____
WATER RESOURCES FEE..... \$ _____
SYSTEM DEVELOPMENT FEE..... \$ _____
TOTAL..... \$ _____

CASH CHECK NO.: _____ CHECK DATE: _____

APPLICATION RECEIVED DATE: _____ ENG. AUTH.: _____

ACCOUNT NO. _____ RECEIVED ADMIN.: _____

ROUTE: _____ SEQ.: _____ PARCEL: _____

COMPLETED FORM WITH INCLUDED PAYMENT REQUIRED AT DISTRICT OFFICE PRIOR TO PROCESSING

APPLICATION FOR PRIVATE FIRE SERVICE CONNECTION

ASSOCIATED DOMESTIC METER ACCOUNT (FROM FIRST PAGE):

Name on Account: _____

Service Address: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Contact: _____ Contact Phone: _____
(If different from Name on Account)

PRIVATE FIRE SERVICE INFORMATION (ONLY IF APPLICABLE):

Fire Riser Size: _____ Connection Type: _____ Applicant is: Owner or Tenant

If Tenant, Provide Owner Name: _____

Owner Address: _____

City: _____ State: _____ Zip: _____

Public water system valves related to controlling the private fire service connection shall only be operated by District personnel. Coordinate all scheduling for activation or isolation with the District office at 575-8100.

NOTICE OF FINAL INSPECTION PRIOR TO SERVICE TRANSFERS

The District will require a final inspection of a water meter and related appurtenances upon completion of construction for all new or renovated buildings prior to transferring water service. This final inspection will occur after the building receives a Certificate of Occupancy from the appropriate jurisdiction, and would verify the District's meter, meter box, endpoint, antenna, and other equipment and related items were not damaged and remained properly installed during the construction phase of the building. This inspection will also verify the meter box is cleaned out and set to proper grade in accordance with District standards.

If damage or changes to the original installation are found upon inspection, the owner of the meter account will be held responsible for District costs associated with all repairs prior to transferring water service to a subsequent owner. The current owner will be notified of these damages or changes, and the cost of repairs or restoration will be included on their final bill. All charges on the owner account are required to be paid prior to transferring water service to a subsequent owner. Upon prior approval by the District, a properly licensed contractor may address these repairs or restoration under permit through the District office.