



LARGE METER APPLICATION

APPLICANT/S NAME AND ADDRESS	SERVICE LOCATION ADDRESS
_____	_____
_____	_____
_____	Assessor's Parcel Number _____
Telephone No. _____	Acreage: _____ Zoning: _____
Meter Size Requested _____	Meter Type: _____

Commercial:

Minimum GPM ____ Continuous GPM ____ Intermittent Flow for Maximum GPM (1-3 minute duration) _____

Landscape:

Minimum GPM ____ Continuous GPM ____ Intermittent Flow for Maximum GPM (1-3 minute duration) _____

Type of Service Requested: Potable or Recycled (please circle one)

Type of Business _____

Explain in detail the type of project your pursuing: _____

_____ **(Initial)**

I agree to comply with the Administrative Regulations and restrictions currently in effect. I understand that the meter may be installed locked off until an approved Backflow Prevention Device has been installed by the owner and approved by EID personnel.

It is the responsibility of the applicant to specify the proper meter size. The applicant shall be liable for meter repair costs if the District determines that repair work was required as a direct result of excessive wear beyond meter design flow standards. Should domestic demands exceed the meter capabilities, a meter upsize may be required and additional Facility Capacity Charges associated with the larger meter will be assessed.

_____	_____
Applicant/s Signature	Date

For EID's staff use only

_____	_____	_____
Customer and Development Services	Date	Comments

_____	_____	_____
Meter Services:	Date	Comments

_____	_____	_____
Cross Connection Specialist:	Date	Comments

_____	_____	_____
Recycled Water:	Date	Comments

_____	_____	_____
Assistant Engineer:	Date	Comments