

Water Meter Application 555 S Main St Independence, OR 97351 * Phone: 503-838-1212 * Fax: 503-606-3282

New Installation	Relocation/Rem	oval Othe	er
Date Requested:	(Please allow at least ONE WEEK in advance)		
Name:			
Property Type: R	esidential Comm	ercial 🔲 Industr	ial Multi Unit/ ADU
Property Address:			
Billing Address:			
there will be a charge for wa be charged the full base rate I agree to comply with all th	eter and water usage. After the efor water, sewer, storm ERL e City of Independence regula estruction, my services will be	ne home, has had its find I's and water usage. ations and governing co	ter. While under construction al inspection, the services will then des. I also agree that if my bill is to pay all fees and pass due
Applicant's Signature			Date
	FOR CITY'S BUILDING	DEPARMTMENT US	
Size of Meter: 34"	1" 112"	2" 3" 6	n
Water Connection Fee:	\$	Sewer Connectio	n Fee: \$
Date Paid:	Cash Check	Credit Card Re	ceived By:
ERU'S:	Number of Se	ewer Units:	
FOR	CITY'S PUBLIC WORKS DE	PARTMENT/ WORK C	RDER USE
Meter #:	Address:		Meter Size:
Meter #:	Address:		Meter Size:
Meter Location:			
Comments:			
			Date Installed:
	FOR CITY'S	FINANCE USE	
Account #:	Location #:		