



HYDRANT METER APPLICATION FORM

Company Name: _____

Office Telephone Number: _____

Billing Address Street: _____

City, State, and Zip code: _____

Contact Person: _____

Phone Number: _____

Location for Use: _____

Length of time meter is needed (days, weeks, months): _____

Select meter size (**CIRCLE ONE**)

	<u>5/8 "</u>	<u>3"</u>
Meter fee	\$ 190.00	\$ 1,300.00
Deposit	\$ 135.00	\$ 1,685.00

Payment must be made with cash, check, or money order only.

(These fees are refundable as long as the meter and backflow are returned in good working order.)
All meters are picked up at the meter shop located across from the water treatment plant at 901 NW 66th Ave between 8 a.m. and 4 p.m. Access will not be granted to the premises without the proper paperwork and notification from City Hall.

Hydrant availability charges will be charged monthly until the meter is returned:

Meter size:	<u>5/8 "</u>	<u>3"</u>
Minimum monthly availability charges (excludes 10% tax)	\$ 12.58	\$ 404.22

Consumption charges are \$4.70 per 1,000 gallons plus 10% tax

The City needs a meter reading by the 10th of each month or usage will be estimated. Readings may be emailed to waterbills@margatefl.com or may be called into customer service at (954) 884-3666. Please include the account number, meter number, name, phone number, and all **7 digits of the meter reading**. I agree to the terms and conditions stated above.

E-mail Address _____

Customer Signature _____