



**District of Ucluelet
Water Meter Application**

Owner Name:
Service Address:
Legal Address:
Billing Address:
Phone Number:
Secondary Phone:

Contractor Name:
Phone Number:

Type of Service

Single Family	Manufacture Home- private lot	Commercial
Duplex	Hotel/Motel	Industrial
Townhouse/Condo	Office/General	Other
Multi Family 3 & 4 Units	Restaurant	
Multi Family 4+ Units	Institution	

Meter Size

3/4"	1 1/2 "	3"	6"
1"	2"	4"	Other

Water Meter

Manufacturer:
Meter Type: Displacement ____ Turbine ____ Compound ____
Model No:
Body Serial No:
Strainer Installed:
By-pass: Yes ____ No ____ Valve Sealed ____ Valve Closed ____
Location of Meter:

I understand that water service will be furnished and used in accordance with the rules, regulations and bylaws of the District of Ucluelet. I further understand that the District does not in any manner guarantee continuous delivery of water on demand nor does it assume any responsibility for damages which may occur due to a interruption of water delivery or change in pressure.

Signed by Owner: _____ Date _____

 (print name)

District Inspector Approval of Water Meter Installation (for office use only)	
Building Permit Number :	Inspection Date:
Meter operational: Yes ____ No ____	
Meter reading at inspection _____	
Inspected by:	