

District of Ucluelet Water Meter Application

FOR APPLICANT USE														
Owner Na	Owner Name:													
Service Address:														
Legal Address:														
Billing Ad	Billing Address:													
Phone Number: Ema							ail Address:							
Contractor Name: Pr							one Number:							
Notice of Personal Information Collection: The personal information on this form is being collected for the purpose of processing your water meter application in accordance with section 26(c) of the Freedom of Information and Protection of Privacy Act. For more information about how this information will be used, please contact the Manager of Corporate Services at 250-726-7744. The undersigned owner/authorized agent of the owner makes an application as specified herein, and declares the information submitted in support of the application is true and correct is all respects. The owner/authorized agent understands that water service will be furnished and used in accordance with the rules, regulations and bylaws of the District of Ucluelet.														
Applicant Name (Owner or agent):							Applicant Signature:							
Date:	ate:													
FOR OFFICE USE														
Building	Inspector	Se	ection											
Water Turn Off/On: \$30 Inspection: \$110.00 (3/4" – 1 1/2") \$410 (2") \$600 (3" and larger)														
Type of Service														
Single Family						Hom	lome- private lot				Commercial			
Duplex					Hotel/Motel						Industrial			
Townhouse/Condo					Office/Genera						Other			
Multi Family 3 & 4 Units					Restaurant									
Multi Family 4+ Units Institution														
Meter Si	Т.	Line Size												
3/4"	1 1/2"		3"		6"		3/4'"		1 1/2"		3"		6"	
1"	2"	ion	4"		Other	Ei	1″	S0/	2"		4"		Other	
Public Works Section						Finance Section								
Location of Meter:						Receipt:								
Barcode: S/N:							Total Fees Received:							
Meter Operational: Yes No							Folio:							
Meter Reading at Inspection:						UB Account No:								
Inspected By:														
Inspection Date:														