



WATER METER CONNECTION

Sequence #

PERMIT APPROVAL:
APPROVED BY: _____
REMARKS: _____

ABOVE FOR CITY USE ONLY

NAME: _____
MAILING ADDRESS: _____
EMAIL ADDRESS: _____
TELEPHONE NO.: _____
FAX NO: _____
CONTRACTOR NAME: _____
CONTRACTOR'S LICENSE: _____

PRINT NAME: _____
SIGNATURE: _____
DATE: _____

METER INFORMATION:
ADDRESS: _____

METER SIZE:
 1" 2" 2" COMPOUND
 4" 4" COMPOUND 6"
 6" COMPOUND 8" 8" COMPOUND
 10" 10" COMPOUND
METER NUMBER

FEES:

WATER MTR. CONNECTION FEE 620-1000-440062 \$ _____
WATER MTR. IMPACT FEES(COMM, INDUST OR RESIDENTIAL)
621-1000-440095,96 OR 97 \$ _____
ENG INSPECT. FEE: 101-1000-440032 \$ _____
ENCROACHMENT PERMIT FEE: 101-1000-420-053 \$ _____

TOTAL: \$ _____
DATE RECEIVED: _____ AMOUNT RECVD: \$ _____

CASH OR CK# _____ RECEIPT # _____

EMPLOYEE: _____

LANDSCAPE SINGLE FAMILY
 MULTI-FAMILY MOBILE HOME
 COMMERCIAL/INDUSTRIAL LOW STRENGTH
 COMMERCIAL/INDUSTRIAL MODERATE
 INDUSTRIAL HIGH STRENGTH
 ELEM. & MIDDLE SCHOOL
 HIGH SCHOOL TEMPORARY ACCOUNT
 FINAL OCCUPANCY ACCOUNT
START DATE: _____
ESTIMATED END DATE: _____

SPECIAL REMARKS

UTILITIES DIVISION: DATE: _____ SERVICE ORDER # _____ ACCOUNT # _____
 NEW OCCUPANT: CURRENT METER # _____ READING: _____

INSPECTION REPORT - ENGINEERING DEPARTMENT

DATE INSPECTED: 1 ST _____ 2 ND _____	INSPECTED BY: _____ _____	REMARKS: _____ _____ _____
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FINANCE DEPARTMENT: DATE: _____ DESIRED DATE: _____
W-9 # _____ DRIVER'S LICENSE # _____ EXP. DATE: _____
D.O.B. _____ SOCIAL SECURITY # _____ RECEIPT # _____ CHECK # _____

- CITY STANDARDS**
- ALL WORK MUST BE TO CITY OF HOLLISTER STANDARD SPECIFICATIONS AND DETAILS.
 - WORK MUST BE INSPECTED BY THE CITY OF HOLLISTER PRIOR
 - ALL WATER SERVICE INSTALLATIONS INCLUDE BOX AND MUST BE MARKED WITH A "W" ON CURB FACE.
 - MINIMUM 1" DIAMETER CTS WATER SERVICE WITH 1" ANGLE CURB STOP FORD, MULLER OR JONES.
 - ALL WATER SERVICES SHALL HAVE A HAND TAMPED SAND BEDDING 9" BENEATH THE TUBING AND SHALL HAVE 6" MINIMUM CLEARANCE ON EACH SIDE.
 - ALL WATER SERVICES SHALL BE POLYETHYLENE CTS SDR 9 (ASTM D2737) TUBING
 - CORPORATION STOP SHALL BE FORD, MULLER OR JONES.
 - WATER METER BOX SHALL BE CHRISTY B12 WITH B12 G LID OR APPROVED EQUAL.
 - A MINIMUM CLEARANCE OF 12" BETWEEN WATER SERVICES REQUIRED ON COMMON TRENCH.
 - ALL TUBING CONNECTIONS SHALL BE THE COMPRESSION TYPE: FORD: PACK JOINT", MULLER "INSTA-TITE" OR EQUAL.