

## BUILDERS METER INSTALLATION FORM

To send in a service application for a Tap-in fee only. We will need the following items before it is accepted:

1. The form will need to be filled out completely with all information including Name of Builder, service address, lot number, subdivision and Service City. We also need a mailing address and office telephone number.
2. We will need a copy of your State Plumbing Permit.
3. We will need a copy of the building permit.
4. You will need to send the application in the mail or you may bring it into the office with an original signature and check for the correct amount and meter size.
5. You will need to specify Ready\_\_\_\_\_or Will Call\_\_\_\_\_.

In order to schedule your meter installation **ALL** of the above item's must be received.

ACCOUNT NUMBER \_\_\_\_\_

**BOONE COUNTY WATER DISTRICT**

P.O. Box 18, Burlington, Kentucky 41005

**SERVICE CONTRACT**

Meter Size \_\_\_\_\_

CK# \_\_\_\_\_

**WATER SERVICE**

CASH \$ \_\_\_\_\_

In consideration of the payment of \$ \_\_\_\_\_ to the Boone County Water District, herein called the District, the receipt of which is hereby acknowledged, and the agreement by the undersigned applicant, described herein below to purchase water from the District in accordance with the rules and regulations of the District, the District agrees to furnish the undersigned water at the premises described herein below as soon as practicable. Should anything prevent the District from supplying the undersigned with water, its only liability shall be to return the said \$ \_\_\_\_\_ to the undersigned.

**Service Address**

Name \_\_\_\_\_

Street \_\_\_\_\_ LOT # \_\_\_\_\_

City \_\_\_\_\_ Subdivision \_\_\_\_\_

IN TESTIMONY WHEREOF, Witness the signature of the undersigned.

Ready \_\_\_\_\_ Will Call \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

X \_\_\_\_\_  
(APPLICANT)

ACCEPTED this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

BOONE COUNTY WATER DISTRICT

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

by \_\_\_\_\_

MAIL BILL TO \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

**\* If this is a new meter installation, location must be staked 3' to 5' from the surface of the road.**

**\* Pressure on our water system can range from 30 PSI to 150 PSI. We recommend that a pressure regulator be installed. If you have any questions, please call our office.**