



7018 Pine Street * P.O. Box 9 * Hughson, CA 95326 * Phone (209) 883-4054 Fax (209) 883-2638

PUBLIC WORKS HYDRANT WATER METER REQUEST FORM

DATE CHECKED OUT: _____ Estimated Date of Return: _____

JOB LOCATION: _____

LOCATION OF METER: _____

COMPANY NAME: _____

ADDRESS: _____

CONTACT NAME/NUMBER: _____

The Hydrant Water Meters are checked out from and assigned by Public Works. The Hydrant water meters are to be returned when the job is completed. The City of Hughson will read the Hydrant Water Meter on a monthly basis, record those readings and charge the appropriate rate for usage.

Signature of responsible party: _____

Deposit Fee Amount per Hydrant Water Meter is \$2,000.00 Check# _____

Hydrant Water Meter serial # _____ (Being checked out)

Gallons/Cubic Feet (circle one)

Beginning reading: _____

Hydrant Water Meter serial # _____ (Returned)

Ending reading: _____

Date Returned: _____

Signature of person returning meter: _____

For Office Use Only

Meter # Checked Out	Meter # Checked In	Deposit \$	Usage \$	Refund \$ or Bill \$	PW called to pick up meter