City of Nampa
Hydrant Meter Application

All requests for hydrant meters must be made in person at **24 1st St S,** Nampa Idaho. A deposit in the amount of $800.00 must be submitted at the time of application and all past due balances must be paid in full prior to the City accepting additional requests for meter usage. For meter questions, call **(208) 468-5860**.

Billing Information

Application Date _____ Estimated Project Completion _____ Inspector _____

Company to be billed: _____

c/o, P.O. Box, or street number and name

_____

City State Zip Code

Office Contact Person: _____

Day Phone ( ) _____ Cell Phone ( ) _____

Field Contact Person: _____

Day Phone ( ) _____ Cell Phone ( ) _____

Location Information

Project Location _____

Major Cross Streets _____

Terms of Use

Please read each statement carefully and then initial on the line provided.

_____ I understand that hydrant meter usage is to be used only for approved construction project.

_____ I understand that the hydrant meter must be either **brought in every month OR a picture of the read with the hydrant meter #** emailed to **water@cityofnampa.us** by the 28th of the month or **a $25 late (No Read) fee will be assessed**.

_____ I understand that equipment damage will be charged to my account.

_____ I understand the deposit will be returned after the meter is returned and any water usage charges and all late charges have been paid in full.

_____ I understand that temporary water meters are for commercial construction purposes only and may not be hard plumbed or used for irrigation purposes. Should it be found that a water meter is being used improperly, we reserve the right to remove the meter without notice.

_____ I have read and agree to abide by all provisions set forth in the Nampa City Hydrant Meter Policy.

REMINDER: Using un-metered water or tampering with fire hydrants or altering hydrant meter assemblies are actions that could result in your hydrant meter permit being revoked and a fine of $200.

_____ _____ _____

Printed Name Applicant Signature Date of Request

For Office Use Only

Deposit Paid Amount _____ Check No. _____	Account No.	Customer No.
Meter No.	Date Returned	ROA Date
Additional Equipment	Returned By	Deposit Request Date
Start Read	Final Read	Amount Returned