

Maricopa

Consolidated Domestic Water Improvement District

PO Box 209, Office: 45920 W. Garvey Ave., Maricopa, AZ 85139

Phone: 520-568-2239 Fax: 520-568-2185, Emergency: 520-251-1896, MCDWID85239@hotmail.com

CONSTRUCTION METER AGREEMENT

We of _____ agree to rent from the Maricopa Consolidated Domestic Water Improvement District (District) a Construction Meter. We agree that while said meter is in our possession, we will be responsible and liable for this meter/equipment. The District will install the meter, and if it needs to be relocated, we will notify the District. At no time will it be moved without the District's knowledge. We understand that a \$1,500.00 deposit is required of which \$1,250.00 is refundable after the final bill is settled or deducted from the refundable portion of deposit. The remainder of a \$1250.00 deposit will be refunded after total water usage/fees are calculated for a Final Bill. The refund of any remaining balance will be sent to the account information on file unless otherwise requested.

Company Name: _____ Telephone: _____
Address: _____ Email: _____

BLUESTAKE REQUIREMENT: Company/Customer Agrees to notify MCDWID for Blue stake marking request (3) days prior to project start date.

Project Start Date: _____ Onsite Contact _____ Phone: _____

Project Name/ Location: _____

Rep. (Print name) _____ Company Rep. Signature _____ Date _____ *Copy of Photo ID or W9 required.

* Office Use*

Payment Date: _____ # _____
MCDWID Office Rep. _____ App. Date _____ \$1,500 Recvd by: Card, Cash or Check, M/O

FIELD OPS.-WORK ORDER/ONSITE INSTALLATION ACKNOWLEDGEMENT

Meter #: _____ Meter Start Read: _____ Acct# _____

Meter location: _____

Replacement Mtr# _____ Replacement Mtr Start Read: _____ Date: _____

Replacement Backflow Date: _____

Maricopa CDWID Field Ops. Rep. _____ Date _____ *Photo of completed installation required.

ACKNOWLEDGEMENT OF THE RETURN OF METER

Removal Request by: _____ Phone: _____ Date: _____

Removal Date: _____ Meter #: _____ Final Read: _____

[] YES [] NO: Returned to Maricopa Consolidated DWID in good and working condition.

Replacement or Damages fee: _____ Remainder of a \$1250.00 deposit is refunded after total water usage/fees are calculated for a Final Bill.

Maricopa CDWID Rep.: _____

Form Revised 3/28/2022