

**CITY OF CORNELIA
HYDRANT METER APPLICATION**

All information must be provided and a deposit remitted prior to the initiation of service.

Name of Applicant: _____

Billing Address: _____

City: _____ State: _____ ZIP: _____

Telephone Number: _____

Fax Number: _____

Contact Name: _____

Exact location for hydrant meter: _____

Signature of Applicant

Date Applied

Date Service Initiated

Date Received

Fees Paid: _____

Meter Serial Number

Start Reading

Ending Reading

FEE SCHEDULE:

Hydrant meter deposit- \$1,000.00

Refundable after completion of project and water usage has been paid.