



# APPLICATION FOR WATER / SEWER / IRRIGATION / HYDRANT METER SERVICE (CIRCLE SERVICES REQUESTED)

Department of Public Works  
11575 Maxwell Road  
Alpharetta, Georgia 30009  
Telephone: 404-612-3421

Project #:

## APPLICANT INFORMATION

BILLING NAME AND ADDRESS		
LAST NAME	FIRST NAME	MIDDLE INITIAL
ADDRESS		
ADDRESS		
CITY	STATE	ZIP CODE
TELEPHONE NUMBER	ALTERNATE TELEPHONE NUMBER	
E-MAIL ADDRESS		

## PROPERTY INFORMATION – SERVICE ADDRESS- METER INFORMATION

SERVICE ADDRESS			
STREET NUMBER	STREET NAME	CITY / ZIP CODE	
SUBDIVISION NAME	BLOCK	LOT NUMBER	CUSTOMER TYPE
REQUESTED METER SIZE (IF APPLICABLE)	SERVICE TYPE (SELECT ALL THAT APPLY)		
	DOMESTIC	FIRE*	IRRIGATION

\*If a fire meter service is selected, please complete the **Water Meter Certification** form

I hereby agree to accept the service herein applied for, subject to all Ordinances, Rules, and Regulations of, or pertaining to the Fulton County Department of Public Works now in effect, or that may hereafter be adopted and that all meters are property of Fulton County. All damaged or stolen meters are the responsibility of the property owner, for which there may be an additional charge. The property owner is responsible for the maintenance of the sewer lateral.  
The Builder is responsible for all water bills until transfer of property to Owner by Builder.  
This permit shall expire 6 months from the issue date unless an approved inspection is performed within that period or 6 months from the date of the most recently approved inspection.  
Water and Sewer Permits are NON-TRANSFERRABLE.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone Number \_\_\_\_\_

## METER INFORMATION

DATE INSTALLED	METER NUMBER	METER STATUS	MFG. IDENT.
METER SIZE	CODE	METER AGE	

PERMIT NUMBER	CHARGES	SPECIAL INSTRUCTIONS
WATER:	METER INSTALLATION FEE:	
SEWER:	WATER SYSTEM CAPACITY FEE:	
IRRIGATION:	BORING CHARGES:	
FIRE HYDRANT METER:	SEWER SYSTEM CONNECTION FEE:	
	TOTAL:	

\*\*\*Please allow 10 business days for processing the application.\*\*\*