



## City of Asotin

Phone: 509-243-4411

PO Box 517 121 Cleveland Street

Asotin WA 99402

Fax: 509-243-1223

### BULK HYDRANT WATER METER AGREEMENT

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Contractor License # \_\_\_\_\_

Beginning Meter Reading #: \_\_\_\_\_ Ending Meter Reading #: \_\_\_\_\_

Total Water Used: \_\_\_\_\_ Service Start Date: \_\_\_\_\_ Service End Date: \_\_\_\_\_

**Please Remit to:**  
City of Asotin  
121 Cleveland St  
PO Box 517  
Asotin WA 99402

**Hydrant Meter Use Fee**  
\$325.00

**Storage Tank**  
\$20.00 x \_\_\_\_\_ day =\$

**100 Cubic or 748 gallons**  
\$1.00 x \_\_\_\_\_ =\$

**Amount Paid:** \_\_\_\_\_

**Date Paid:** \_\_\_\_\_

**Check #/Cash** \_\_\_\_\_

If the hydrant meter or water main is damaged, the Contractor is responsible and will pay to replace or repair damaged Equipment. Damage Costs to be determined by Maintenance Supervisor if any.

\_\_\_\_\_  
Signature of Owner or Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name