



CITY OF POWAY
13325 Civic Center Drive
Post Office Box 789
Poway, California 92074-0789
Phone (858) 668-4401
Fax (858) 668-1200

APPLICATION FOR HYDRANT METER WATER SERVICE

The water received from this meter is NOT to be used for human consumption.

Today's Date _____ Date to Set Meter _____

Location of Hydrant _____

Company Name _____

Bill to Address _____

Federal I.D. # _____ Business Cert # _____

Building Permit Required? Yes No If yes, Permit # _____

Contact Person _____ Phone # _____

Corporate Address _____

Business Phone # _____

Local Contact _____ Phone # _____

By signing this application, I am an authorized representative of the customer. Terms of service require the customer to observe all City of Poway regulations related to utility service and to pay all bills when presented. Please INITIAL ON EACH BOX below acknowledging that you agree to these terms.

Service will be discontinued if the account becomes delinquent. The City of Poway is not responsible for any property damage that may be caused from disconnection due to delinquency.

A reconnect fee will be charged if the service is interrupted for failure to pay. The city reserves the right to require a deposit at any time for accounts that the City deems at risk for collection. The customer acknowledges water service will be turned on at the above location and understands the City of Poway is not responsible for any property damage that may be caused from the water being turned on at any time. If the customer moves or wants their name removed from this account, a representative must contact Customer Services at the phone number or address listed above. The customer is financially responsible for all charges until the City receives notification.

Signature of Applicant _____

Printed Name and Title _____

City Use Only

Account #		Meter #	
C.S. Worker	Date	Meter Read	
Hydrant Meter Location/Service Address		Application No.	

HYDRANT METER APPLICATION

You may print this form and complete it by hand, or you can fill it out online, then print and sign. Completed form, with deposit, must be brought in person to Customer Services at City Hall, 13325 Civic Center Drive, Poway, CA 92064.

Pursuant to City of Poway's Rules and Regulations Governing Water Service:

Applicant shall deposit the sum of \$1,200.00 with City, to be retained during the entire period the hydrant meter is being used. If you make this deposit by check, the City will cash the check. The deposit will be refunded, without interest, minus charges for meter loss or damage, closing water bill, and/or installation and removal, when the meter is removed and the account is closed.

Applicant shall pay a bimonthly basic water service charge (capacity charge); in addition to water consumption charges from the time the meter is installed until it is removed. Hydrant meter bills are mailed at the end of even-numbered month (e.g., February, April, etc.) An administrative fee of \$96 will be assessed on the final bill.

Applicant shall prevent damage to the meter or to any other loaned facilities of the City, which are involved in furnishing the transient service from the time they are installed until they are removed by or returned to the City. If the meter or other facilities are damaged, lost or stolen, Applicant shall pay for the cost of making repairs and/or replacement.

The installation of a backflow protection device is necessary on all hydrant meters. All such devices shall be installed by Applicant, tested by a certified tester approved by the City within five (5) days of the meter being set, and inspected by City. City shall have the right to test and inspect these devices to ensure they are in a satisfactory operating condition. Applicant must call 858-668-4735 or 858-668-4744 to provide appropriate test reports, confirming that the installed backflow protection device has been tested prior to use of the hydrant meter.

Service of water from the hydrant will be **immediately** discontinued by City if a backflow prevention device is not installed, if test reports have not been provided to City, if it is found that backflow prevention device has been removed or bypassed, if unprotected cross connections exist on the premises, or if the customer fails to timely pay any charges due hereunder. Service will not be restored until such conditions are corrected.

Within two (2) business days of this application, City shall install a hydrant meter at the location requested. The meter will be chained to the hydrant. Only City personnel are authorized to remove, relocate, or service the meter. Please call 858-668-4401, at least two business days in advance to request removal, relocation or service of the meter.

Date

Applicant Signature

Telephone Number

Printed Name

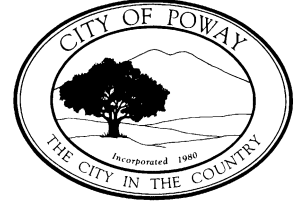
Requested Meter Location

OFFICE USE ONLY

Notified backflow/cross-connection control _____ CS Tech Initials _____

Date

CITY OF POWAY



CONSTRUCTION METER FEE SCHEDULE

(Fees quoted are effective as of 03/15/2018. Fees are subject to yearly review and could change.)

DEPOSIT REQUIRED: \$1,200.00

(Deposit is held until the account is closed and the meter is picked up and returned in the same condition that it was issued. Any damage to the meter will be assessed to the customer. If meter is stolen, the customer is responsible for a \$1,200.00 fee and your deposit will not be returned.)

WATER CAPACITY CHARGE: \$393.23 BI-MONTHLY (\$6.55 A DAY)

(This is daily charge whether water is used or not.)

WATER CONSUMPTION CHARGE: \$5.23/UNIT (1 UNIT = 748.05 GALLONS)

ADMIN. SERVICE CHARGE

UPON CLOSING ACCT: \$96.00

(Covers placing & removing of meter, meter testing and billing.)

**DAMAGES CAUSED
WHILE METER IS IN
CUSTOMER'S
POSSESSION:**

UP TO \$1,200.00

BI-MONTHLY CYCLE BILLS:

Bills are processed at the end of Feb, April, June, August, October, & December.

Payment is expected on due date noted on bills, which is approximately 2 weeks after bills are processed. If not paid in a timely manner, late fees and/or termination fees will be charged and the meter will be picked up by City.

If you only require the meter for a short period of time, your closing bill will be processed within 1 week after the meter has been picked up or returned. Call Customer Services 858-668-4401 when you are finished with the meter so we can schedule a pickup of the meter. Prior to our picking up the meter, you must remove your backflow device.

CITY OF POWAY

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PO.BOX.789

POWAY, CA 92064-0789

Phone: 858-668-4744

Fax: 858-668-1255

Backflow Prevention Assembly

Test Report

Mailing Address

Device:

Install Due:

Last Test:

Test Due:

POWAY, CA 92064

Account #: *

Serial #:

Meter #:

Service Address

Address:

Company:

Contact:

Hazard:

Location:

	Reduced Pressure Principle Assembly			RP <input type="checkbox"/> DCDA <input type="checkbox"/> DC <input type="checkbox"/> RPDA <input type="checkbox"/> PVB <input type="checkbox"/> Air Gap <input type="checkbox"/> SVB <input type="checkbox"/> AVB <input type="checkbox"/>
	Double Check Valve Assembly			
	Check Valve #1	Check Valve #2	Relief Valve	PVB/SVB
Initial Test	Leaked <input type="checkbox"/> Closed Tight <input type="checkbox"/> Held at _____ PSID	Leaked <input type="checkbox"/> Closed Tight <input type="checkbox"/> Held at _____ PSID	Did not Open <input type="checkbox"/> Opened at _____ PSID	AIR INLET Did not Open <input type="checkbox"/> Opened at _____ PSID
Repairs	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	CHECK VALVE Leaked <input type="checkbox"/> Held at _____ PSID Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>
Details				AIR INLET Opened at _____ PSID
Final Test	Closed Tight <input type="checkbox"/> Held at _____ PSID	Closed Tight <input type="checkbox"/> Held at _____ PSID	Opened at _____ PSID	CHECK VALVE Held at _____ PSID

Comments

The above report is certified to be true.

Line Pressure _____

Meter Reading _____

Held Backpressure _____

#2 Shutoff _____

Relief Valve Exercised _____

	Date/Time	Tester	Signature	Tester #	Test Kit	Passed	Failed
Initial Test						<input type="checkbox"/>	<input type="checkbox"/>
Repairs						<input type="checkbox"/>	<input type="checkbox"/>
Final Test						<input type="checkbox"/>	<input type="checkbox"/>

Certified Backflow Prevention Assembly Testers

February 6, 2019

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CITY OF POWAY
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POWAY, CA 92064-0789
858-668-4744

Fax: 858-668-1255

Company	Phone	
1ST CHOICE BACKFLOW	877-723-1835	BONSALL
WESTERN FIRE PROTECTION	858-513-4949	POWAY
TIM DANIELS PLUMBING	619-749-2744	EL CAJON
VAUGHN JACOBS	619-261-1465	CHULA VISTA
A AWESOME BACKFLOW	619-443-1846	LAKESIDE
M&J BACKFLOW SERVICE	858-486-1524	POWAY
CALIFORNIA BACKFLOW	858-518-9688	VISTA
ALWAYS HANDY	760-420-0606	ESCONDIDO
DEPENDABLE PLUMBING	858-486-5111	POWAY
CARPENTERS PLUMBING	760-745-0465	ESCONDIDO
PALOMAR BACKFLOW	760-746-2501	ESCONDIDO
COUNTYWIDE MECHANICAL	619-449-9900	SANTEE
AHLEE BACKFLOW	619-444-7781	SANTEE
AAA TATE BACKFLOW	760-445-5650	POWAY
IDEAL PLUMBING	619-583-7963	SAN DIEGO
BILL HOWE PLUMBING	619-275-9120	SAN DIEGO
CITY TESTER		
BOOTH'S PUMP SERVICE	760-789-9147	RAMONA
ELITE BACKFLOW SERVICE	619-818-4242	ALPINE
SUN WEST PLUMBING	858-566-7992	SAN DIEGO
EMCOR SERVICES	619-265-5880	EL CAJON
ALL HOURS BACKFLOW	619-471-7999	SAN DIEGO
HATCH IRRIGATION	619-888-7571	SANTEE
SUTHERLAND IRRIGATION	760-723-9421	FALLBROOK
\$49 PASS TO PAY	619-484-6198	EL CAJON
DISTRICT BACKFLOW	760-699-1426	RAMONA
SPILMAN LANDSCAPING	760-270-5678	RAMONA
ASSOCIATION CALL	858-226-0572	SAN DIEGO
PACIFIC BACKFLOW CO.	1-800-603-4467	OCENSIDE
AHLEE BACKFLOW SERVICE	619-444-7781	SANTEE
VAUGHN IRRIGATION	760-747-0353	ESCONDIDO
DEHART BACKFLOW	760-788-0231	RAMONA
SCRIPPS RANCH LANDSCAPE	619-843-4077	SAN DIEGO
A.O. REED & CO.	858-565-4131	SAN DIEGO
BACKFLOW SERVICES	619-303-1561	SANTEE
BAJ BACKFLOW	619-722-1372	ALPINE
HAYES BACKFLOW TESTING	619-443-7507	LAKESIDE
NORTH COAST BACKFLOW	760-942-7547	SOLONA
LAIRDS B+B MAINTENANCE	760-480-2789	ESCONDIDO

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February 6, 2019

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POWAY, CA 92064-0789

858-668-4744

Fax: 858-668-1255

Company

Phone

JACKSON & BLANC

858-831-7960

SAN DIEGO