## **City of Jersey Village**

## **Temporary Meter Application**

Service Address	
Name of Business	
Name of Owner	¥
Mailing Address	
Business Phone #	Emergency Phone #
Approx date of meter return _	
Deposit Amount \$850.00 (Ref	unded when account is finaled)
ADDRESS AND THEY WILL CO READING. IF ABOVE PARTY D ESTIMATE OF WATER USAGE SHALL PROVIDE THE CITY WIT THE DEPOSIT WILL THEN BE A MAIL A CHECK TO THE FORM	INSIBLE FOR PAYMENT OF ALL WATER BILLS AT THE ABOVE NTACT THE CITY ON THE 25 <sup>TH</sup> OF EVERY MONTH WITH A METER DES NOT CALL IN WITH A METER READING, BILLING WILL BE AN UPON RETURNING THE METER, THE RESPONSIBLE PARTY HA MAILING ADDRESS & PHONE NUMBER FOR THE FINAL BILL. PPLIED TO THE FINAL BILL. IF A REFUND IS DUE, THE CITY WILL ARDING ADDRESS. IF THERE IS A BALANCE REMAINING, THE E CITY BY THE 25 <sup>TH</sup> OF THE NEXT MONTH.
ALL BILLS ARE DUE ON THE 25 WAIVE PENALTY.	TH DAY OF EACH MONTH. FAILURE TO RECEIVE BILL DOES NOT
PICKED UP BY:	PRINTED NAME:
DL#	DATE:
METER #	METER READING:
	METER READING.
Receipt Number	FOR OFFICE USE ONLY  Account Number
Mailing Address: 16501	Tersey Dr <b>Phone:</b> 713-466-2100
Jersey	Village, TX 77040