



City of Statesboro
 Water & Sewer Department
 58 East Main Street, Suite B
 Statesboro GA, 30458
 (912) 764-0693

**HYDRANT METER/TEMPORARY WATER
 APPLICATION**

Applicant Name: _____ Phone: _____

Service Address: _____ _____ _____ Inside city limits <input type="checkbox"/> Yes <input type="checkbox"/> No	Billing Address: _____ _____ City _____ State _____ ZIP _____
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Site Contact: _____

Phone: _____ Email: _____

TOTAL DUE:	\$700.00 SECURITY DEPOSIT (refundable) \$60.00 ONE-TIME SERVICE FEE
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Actual water usage will be charged and billed using the applicable water rate schedule as determined by the Water/Sewer Superintendent.

Customer Signature _____ Date _____

Notes _____

<u>METER INFORMATION:</u>	
DATE INSTALLED/PICKED UP _____	
BEGIN READING _____	END READING _____
METER NUMBER _____	SIZE _____

<u>PAYMENT:</u>	
DATE _____	
METHOD _____	C/C _____ CHECK # _____
RECEIVED BY _____	