



Thank you for your request regarding a Construction Hydrant Meter. We will require the following:

1. A check in the amount of **\$3000.00** for the deposit, payable to California American Water.
Please note: Your \$3000 deposit will be cashed upon installation of the hydrant meter. Once the meter is picked up and returned to our office, your deposit will be refunded, less any charges for damages. Please allow 2 – 6 weeks for deposit refund checks.
2. Complete and submit the attached application.
3. Attach an area map depicting where the hydrant meter will be located.

Send or bring the above items to:

*California American Water
Cristina Courtright
4701 Beloit Dr.
Sacramento, CA 95838*

Email: cristina.courtright@amwater.com

If you have any questions, please feel free to contact me at (916) 568-4229.

Thank you,

Cristina Courtright
Operations Specialist
California American Water



Construction Water Hydrant Meter Agreement

This agreement is made and entered into on this _____ day of _____, 20____,

between _____ (“**Applicant**”) and California-American Water Company (“CAWC”), a California corporation. The parties agree to the following:

- 1) CAWC will issue to Applicant a Fire Hydrant Meter to be used only to provide water for the Construction Project being developed by applicant at (address):

- 2) Applicant is responsible for the security and safekeeping of the Meter. Applicant will advise CAWC upon completion of the project, meter will then be can picked up by a CAWC Technician.
- 3) Applicant shall not allow any other person or entity to use the Meter for any purpose.
- 4) Prior to obtaining Meter, Applicant will pay to CAWC a fully refundable deposit of **\$3000.00** per Meter. CAWC may retain and apply the deposit, or any portion of the deposit, toward damage to the Meter or any part of the CAWC water system due to fraudulent use, misuse, or negligence, or to satisfy any claim for indemnity hereunder. Upon return of the Meter, CAWC will return any unused portion of the deposit to Applicant. The deposit shall not accrue interest.
- 5) **TO AVOID PRESSURE SURGES, HYDRANTS MUST BE OPENED AND CLOSED VERY SLOWLY—30 seconds from full close to full open or from full open to full close. Only approved fire hydrant wrenches should be used, and fire hydrant caps should be replaced when fire hydrant is not in use.**
- 6) Applicant shall compensate CAWC for any damage Applicant causes to Meter or CAWC water system, and Applicant agrees to pay such compensation in a timely manner, not to exceed 30 days from presentation of invoice(s).
- 7) Applicant shall be solely responsible for any claims and liabilities for injury to persons or damage to property arising out of the use of construction water, and Applicant agrees to defend, indemnify, and hold CAWC, its officers, employees and agents harmless from any such claims.
- 8) **CAWC will read the Meter on the fourth business day of the month. Meter must be available at all times during normal daily business hours and must be on designated fire hydrant.**
- 9) Taking water from a fire hydrant without the use of a valid Meter constitutes fraudulent use. CAWC prosecutes fraudulent use to the fullest extent of the law.
- 10) Cal-Am reserves the right to terminate Applicant's construction water permit upon Applicant's failure to comply with any of the above-listed requirements for obtaining and using the Meter.

I agree to abide by the above procedures:

Applicant Signature _____ Date: _____

California-American Water Company Representative

_____ Date: _____



Customer Information Form – Construction Hydrant Meter Checkout

4701 Beloit Dr. Sacramento, CA. 95838 Office (916) 568-4229
Hours of operation: Mon – Fri 8:30am – 4:00pm

Please note: Your \$3000 deposit will be cashed once the hydrant meter is installed. Once the meter is returned to our office and the final bill is paid in FULL, your deposit will be refunded, less any damages. Please allow 6 weeks for refund checks.

Customer will be billed based on currently authorized PUC Tariff Rates: (call for current rates)

COMPANY NAME: _____ BP# _____

CONTACT PERSON: _____ DEPOSIT AMT: \$3000.00

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE #: _____ LOCAL PHONE # (Cell): _____

Email: _____

ANTICIPATED LENGTH OF USE: (NO LONGER THAN 1 YEAR) _____

JOB LOCATION/NAME: _____

HYDRANT# (If Know) : _____

Customer Signature at Check Out: _____ Date: _____

Customer Signature at Check IN: _____ Date: _____

Meter OUT: _____ **Office Use Only** _____

Date Received: _____ Account #: _____ Premise # _____

Meter Read Leaving Office: _____ Meter #: _____ Backflow #: _____

Paid Check # _____ Date: _____ Check amount \$ _____

CONDITION OF HYDRANT METER AT CHECK OUT: (PARTS)

_____ Meter Body (1) _____ Meter Chamber (face)(1) _____ Stand (1) _____ Brass Swivel Fitting(1) _____ Brass Male X Male (1)
_____ Backflow (1) _____ Gate Valve (1) _____ Test Cocks (3) _____ Green – Sacramento County inspection tag (1) Next test date: _____

Date check was sent to SSC to be cashed: _____ Sent by: _____

Meter IN:

Date Returned: _____ Final Read: _____ Move out: _____

CONDITION OF HYDRANT METER AT CHECK IN: (PARTS)

_____ Meter Body (1) _____ Meter Chamber (face)(1) _____ Stand (1) _____ Brass Swivel Fitting(1) _____ Brass Male X Male (1)
_____ Backflow(1) _____ Gate Valve (1) _____ Test Cocks (3)

OTHER COMMENTS: _____

Refunded Deposit: YES or NO Date refunded: _____ Amount: _____

Refund Check #: _____ Mail date: _____ Sent by: _____