



I D A H O

CITY OF DOVER – WATER DEPARTMENT

699 Lakeshore Avenue, Dover Idaho • Mailing Address: PO Box 115, Dover, ID 83825-0115 • Phone: (208) 265-8339 • (FAX) (208) 265-9035 • (web page) cityofdover.id.gov

FIRE HYDRANT USE APPLICATION & AGREEMENT

Non-potable use only

Contractor

Company: _____ Contact: _____

Ofc. #: _____ Cell #: _____

Billing address: _____

Email address: _____

Service location

Address: _____

Property owner name: _____

Building Permit #: _____

Requested start date of service: _____

\$30.00 Fee – Start of service meter installation and initial reading

\$30.00 Fee – End of service meter removal and final reading

\$0.0037 per gallon metered

I, the undersigned, agree to the billing rates and terms as noted above. I will be responsible for all water metered and understand that at end of service the City of Dover will invoice accordingly.

_____ Date: _____

Signature

FOR CITY USE:	
Meter #: _____	
Starting read #: _____	Date: _____
Ending read #: _____	Date: _____
Signature of City Official _____	
Notification to WSFD: _____	

