



DOVER WATER COMMISSION

100 Princenton Ave., Dover, NJ 07801

Phone: 973-336-2200

APPLICATION FOR WATER METER INSTALLATION

	FOR WATER C	OMMISSION USE ONLY
Application No.:		Date Filed:
Water Meter Installation Fee Received By:		Date:
Approved Denied Denied	By:	Title:
	Date:_	Signature:
	·	1 1/2" or Larger Meter Fee \$1,600 Check #
■ Temporary Water Meter		Water Service Connection Number, attach Copy:
Permanent Water Meter		
BUILDING TYPE:		
New Construction	Residential	☐ Single Family
E xisting	Public	Two Family
	Commercial	Other
	Industrial	
PROPERTY LOCATION		
Street Address:		
Municipality:	Block:	Lot:
Description of Existing Use: _		
APPLICANT Name:		
Address:		
		Email:
PROPERTY OWNER Name:		
Address:		
Telephone Number		Email:
CONTRACTOR/PLUMBER	R INFORMATION	
Name:		
Address:		
Telephone Number		Email:
Name:		
Address:		
Telephone Number		Email:

CERTIFICATIONS

I certify that the foregoing statements and the materials submitted are true. I further certify that am the individual applicant or that I am an Officer of the corporate applicant and that I am authorize to sign the application for the corporation or that I am a general partner of the partnership applicant. I certify that I agree to follow the Rules and Regulations adopted by the Town of Dover Board of Water Commissioners regarding the Construction of Water System Facilities.

(If the applicant is a corporation, must be sign by an ausign by a general partner.)	uthorized corporate officer. If the applicant is a partnership, must be
Applicant:	
Printed Name	Signature of Applicant
to make this application and that I agree to be bound same manner as if I were the applicant. I further cer Corporate Owner and that am authorized to sign the a partnership Owner. (If the applicant is a corporation,	the subject of this application, and that I have authorized the applicant by this application, the representations made and the decision in the trify that I am the individual Owner or that I am an Officer of the application for the Corporation or that I am a general partner of the must be sign by an authorized corporate officer. I certify that I agree the Town of Dover Board of Water Commissioners regarding the meral partner.)
Owner:	
Printed Name	Signature of Applicant