Water Meter Application

Date: _____

Applicant:
Name _____

Address _____

City, State, Zip _____ Phone _____

Builder:
Name _____

Address _____

City, State, Zip _____ Phone _____

Property:
Address _____

City, State, Zip _____ Lot/Block _____

Subdivision/Development or Project Name _____

Location where meter will be on property _____

Estate Area ___ Single Family ___ Multi-Family ___ Commercial ___ Industrial ___

Water only _____ Wastewater only _____ or Water and Wastewater _____

Meter Size: 5/8″___ ¾″ ___ 1″ ___ 1 ¼″ ___ 1 ½″ ___ 2″ ___ 3″ ___ 4″ ___

If Commercial or Industrial, indicate square footage _____

Temporary Meter _____ Permanent Meter _____

Return Form to City of Weston Public Works
2599 South Post Road, Weston, FL 33327
Phone: 954-385-2600 Fax: 954-385-2610

Do not write below this line

Water/Wastewater Connection Fee _____ Meter Installation Fee _____ Deposit _____

District Facility Maintenance Charge _____ **Total** _____