

**WATER/SEWER DEPARTMENT  
VILLAGE OF MALONE  
343 WEST MAIN STREET  
MALONE, NY 12953  
(518) 483-4570**

**WATER METER APPLICATION**

I (We), \_\_\_\_\_, Property Owner(s), do hereby

make application to purchase a Water Meter to be installed at: Tax Map ID#: \_\_\_\_\_

Address: \_\_\_\_\_

Current Utility Account #: \_\_\_\_\_ (if applicable)

Type of Property: Business or Rental Dwelling: \_\_\_\_\_

1. I (We) agree to pay the sum of \$ \_\_\_\_\_ Dollars (cash, credit, or check) for the purchase of a \_\_\_\_\_ inch water meter and its installation (see attached sheet for pricing).
2. I (We) agree to comply with all the Rules and Regulations now made, or to be made, by the Village of Malone, relative to water supply, including the prescribed meter quarterly water rent charges.
3. I (We) agree that the installation of said Water Meter shall be inspected and approved by the Village of Malone prior to the turning on of such water service. The Village of Malone retains the right to inspect, test, or repair and/or replace (at owner's expense), and to read any meter for as long as it is in service.

Property Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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Official Use Only:

Date Meter Installed: \_\_\_\_\_ Date Invoiced: \_\_\_\_\_

Date Meter Information Given to Treasurer: \_\_\_\_\_

**VILLAGE OF MALONE**  
**WATER METER WORKSHEET**

Water Account Name: \_\_\_\_\_

Water Account Number: \_\_\_\_\_

Meter Address: \_\_\_\_\_

Installation Date: \_\_\_\_\_

New Meter #: \_\_\_\_\_

Meter Serial Number: \_\_\_\_\_

Employee: \_\_\_\_\_

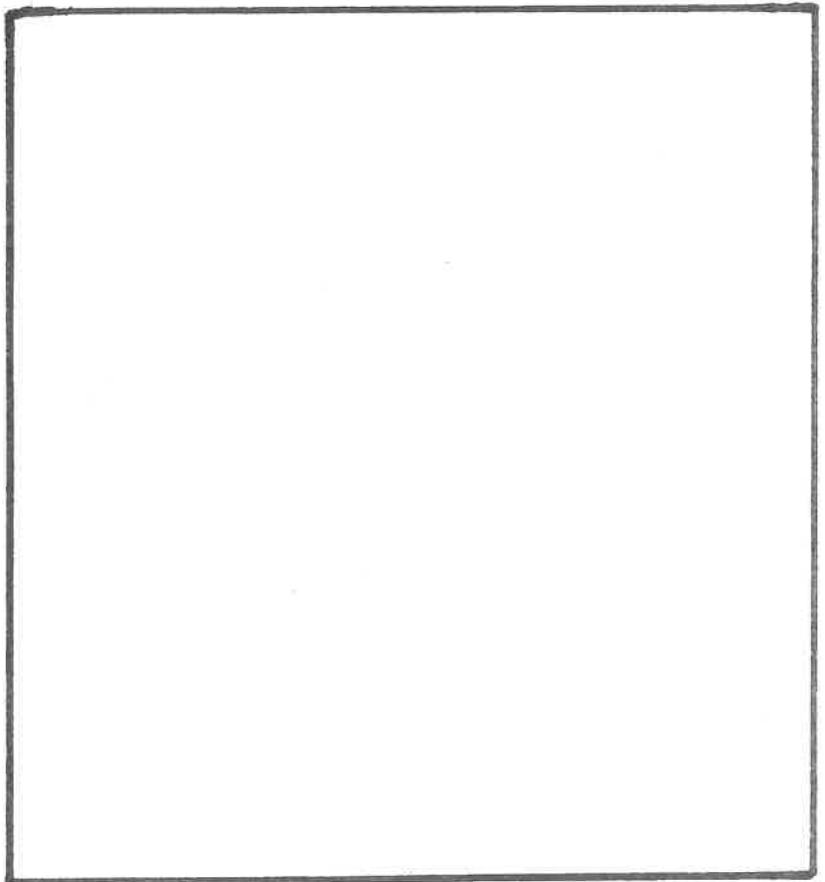
Ending Meter Reading: \_\_\_\_\_

Meter Size – CIRCLE ONE      5/8"      3/4"      1"      1-1/2"      2"

Type of Pipe – CIRCLE ONE      Iron      Lead      Plastic

Action:

- \_\_\_\_\_ New Meter
- \_\_\_\_\_ Replace Meter (frozen)
- \_\_\_\_\_ Unable to shut off water at curb
- \_\_\_\_\_ Remove meter



Location of Radio:

Add to Sketch:

Driveway

Side Street

\_\_\_\_\_ at the location of the Curb Stop

\_\_\_\_\_ at the location of the Meter

\_\_\_\_\_ at the location of the Radio Remote Device

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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Received by: \_\_\_\_\_

Date: \_\_\_\_\_