

**NEW METER REQUEST**

BUILDING NAME \_\_\_\_\_

SERVICE LOCATION ADDRESS \_\_\_\_\_

CONTACT NAME AND DEPARTMENT \_\_\_\_\_

BILL TO DEPARTMENT ACCOUNT # \_\_\_\_\_

TYPE OF SERVICE (select one)	SERVICE PROVIDER (select one)

**METER INFORMATION**

METER NUMBER \_\_\_\_\_

SERIAL NUMBER \_\_\_\_\_

METER MULTIPLIER \_\_\_\_\_

CURRENT READING \_\_\_\_\_

DATE \_\_\_\_\_

SUBMETER OF METER \_\_\_\_\_

IF, YES METER # \_\_\_\_\_

ROUTE # \_\_\_\_\_

BEFORE METER # \_\_\_\_\_

REQUESTED BY \_\_\_\_\_ DATE \_\_\_\_\_

UTILITY AUTHORIZATION \_\_\_\_\_ DATE \_\_\_\_\_