

TRI General Improvement District 1705 Peru Drive, Suite 104 McCarran, NV 89437

Phone: (775) 636-6126

Email: customerservice@tri-gid.org

Date:			

TEMPORARY HYDRANT METER INFORMATION FORM

New Customer Information

Customer Name:	Account Number:		
Primary Billing Contact:	Service Address:		
Field Contact Person:	Date Received:		
Field Contact Phone:	Date Returned:		
Mailing Address:	Initial Meter Read:		
	Final Meter Read:		
Billing Phone:	Meter Serial No.:		
Email Address:	Meter Register No.:		
Meter Deposit: \$ Check No: Date: Meter Description (Size and Multiplier):			
TRI General Improvement District is hereby requested by the undersigned Applic for such service, Applicant and Owner represent and agree as follows; (1) All servicates Of The TRI General Improvement District ("Rules") and may be modified bound by and comply with the Rules, which are incorporated therein as though further District. A copy of the Rules is available upon request for inspection at the District, constitutes a binding contract between the Applicant and Owner and the	ces and charges are governed by the Rules, Regulations And I from time to time, and Applicant and Owner agree to be lly set forth, and any other rules or policies promulgated by trict operating office. (2) The application, when accepted by e District.		
I will return this meter by:	(date)		
A \$1600 deposit is required by Section 4.1 and 5.8 of the TRI-GID I while in my care, I agree to forfeit the deposit			
I also agree to call (775-636-6126) or email (cu TRI-GID by the 17 th of each month to re			
By signing you agree to the above conditions. Customer Signature	:		

TRI-GID Notes: