



City of Jackson
Department of Water Resources

*33 Broadway • Jackson, CA. 95642
 Telephone (209) 223-1646*

Date: _____

PERMIT FOR WATER USE FROM FIRE HYDRANT

BY METERED MEASUREMENT ONLY

Construction Use Only

Company Name: _____ Meter Serial No.: _____

Address: _____ City: _____ Zip: _____ Phone No: _____

Job Location: _____

DEPOSITS

\$ _____	Deposit Paid on Meter
\$ _____	Deposit Paid on Hydrant Wrench
\$ _____	TOTAL DEPOSIT
Check No. _____	

MONTHLY METER READ

DATE	READ

Business License # _____

The following rates will apply:

- Meter Deposit: \$ 750.00
- Meter Rental: \$ 45.00 per month
- Water Charges: \$ 3.24 per 100 cf.
- Hydrant Wrench Deposit: \$ 75.00

Water Service Department Use

Hydrant No: _____

Air Gap Approval: Yes No

Truck License #:

Permit Not Valid Until Air Gap Approval.

Gate Valve and Adapters Supplied: Yes No

Date Meter & Wrench Returned:

Meter Reading:

Permit Issued to: _____
 Signature

Permit Issued By: _____

Printed Name

Monthly Reads must be telephoned into the Utility Billing Department or emailed to water@ci.jackson.ca.us the 20th of each month. Failure to notify will result in a fifty (\$50.00) dollar assessment fee.