

140 S. MAIN STREET
POST OFFICE BOX 151
TONOPAH, NEVADA 89049
PHONE (775) 482-6643
FAX (775) 482-3778
TDD: 711

## Hydrant Meter/Reclaimed Water Service Application

Business or Individual Information	Application Date:	
Full Name:		
Mailing Address:		
	Fax: Cell:	
E-mail:	Anticipated Average Usage:	
Accounts Payable Information	(Gallons/Day)	
	E-mail:	
Project Contact		
Name:		
	E-mail:	
All trucks using hydrant meters or reclaims equipment.	d water truck fill stand must be inspected by TPU personnel prior to using Utility	
Date Inspected:	Inspected By:	
	TPU USE ONLY	
TPU Acct #: Work Orde	No Date Rcvd: Rcvd by:	
	ipt No Equip Deposit: Equip Rcpt #:	
Hydrant Mtr #: Beginning Read:	S/N ID#:Mtr Rcvd:	
Hydrant Location:		
Notes:		
Entered:		

Please initial items one through five, acknowledging you have read and fully understand each item:			
<ol> <li>The hydrant meter provided to CUSTOMER is the property of TPU and is to be used for temporary construction purposes only. The UTILITY will designate and authorize the location where CUSTOMER will connect to receive temporary hydrant metered water.</li> <li>TPU requires a security deposit for usage, an amount to be determined by the UTILITY, from \$75.00 to \$350.00 based on the estimated gallons to be used by the CUSTOMER.</li> <li>TPU requires an equipment deposit for the hydrant meter. CUSTOMER shall provide the UTILITY with a check in</li> </ol>			
the amount of \$2,000 OR THE CURRENT REPLACEMENT COST WHICHEVER IS GREATER. UTILITY shall not process the check or charge credit card unless the CUSTOMER fails to return property or the equipment damaged.			
<ul> <li>4. Hydrant meters shall be read no later than the last business day of each month. Reclaimed water usage shall be read, or customer shall provide load logs to TPU no later than the last business day of the month. Billings are presented to customers the 1st day of each month.</li> <li>5. Reclaimed Water customer's only: I acknowledge receipt of the TPU Effluent Management Plan for Construction Water Use of Reclaimed Water and agrees to comply with the conditions as set for in the Plan.</li> </ul>			
TERMS & CONDITIONS			
<b>Payment of bills</b> : Pursuant TPU Regulations Section Fourteen: Billings and Payments: Billings which are not paid on or before the due date shall be considered delinquent. Delinquent bills shall be subject to a penalty of 10% of the amount due and added to the customer's bill. Accounts 60 days or more past due are subject to termination unless acceptable payment arrangements are made with this office prior to termination. Failure to comply with a payment arrangement may result in termination of service.			
Returned check fee: A fee of \$42.00 shall be charged for all returned checks.			
<b>Call-out fees:</b> Customer requests for non-emergency service between the hours of 3:00 p.m. and 7:00 a.m. Monday through Friday or anytime on Saturday, Sunday or observed holidays will be charged a \$50.00 call out fee.			
I hereby acknowledge that I am authorized to execute this application, as the applicant or on behalf of the applicant and agree to the terms and conditions as outlined. I further agree to comply with the Town of Tonopah-Tonopah Public Utilities (TPU) Water, Sewer, and Reclaimed Water Regulations and other related documents and all State and Federal Regulations. Copies of the TPU Regulations may be obtained at the TPU Office located at 140 S. Main Street, Tonopah, Nevada; or online at <a href="https://www.tonopahnevada.com/tonopah-public-utilities">www.tonopahnevada.com/tonopah-public-utilities</a> . Furthermore, I acknowledge and understand, if my account must be referred to a third party for collections, I will be responsible for any, and all costs related to collection action, including but not limited to: collection agency fees, court costs and reasonable attorney fees.			
Print Name of Authorized Signer Date			
Signature			



The Town of Tonopah – Tonopah Public Utilities is an equal opportunity provider and employer. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at:

## How to File a Program Discrimination Complaint http://www.ascr.usda.gov/complaint filing cust.html

and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, DC 20250-9410

Fax: (202) 690-7442; or

E-mail: program.intake@usda.gov

The following information is required by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish this information, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

(Please Check one in each Category)		Not Hispanic or Latino		
	Race:	Alaska Native American Indian Asian Black/African American Native Hawaiian or Other Pacific Islander White		
	Sex:	Male Female		
I, do not wish to furnish this information.				
Applicant declined to furnish this information, identification was made by:				
Surnar	me	Visual Observation		