

Application No.

**Utility Account** 

## **City of Naples - Utility Permits**

295 Riverside Circle | Naples, Florida 34102 Phone: (239) 213-5051 Fax: (239) 213-5010

## **IRRIGATION METER APPLICATION (RECLAIMED WATER)**

I, the undersigned hereby requ	est to connect to the city recla	aimed water system at	the following property:
METER SIZE:	USE: RESIDENTIAL	☐ MULTI-FAMILY	COMMERCIAL
PROPERTY OWNER:			PH #:
SERVICE ADDRESS:			FOLIO #:
BILLING ADDRESS:			
CONTACT:			PH #:
COMPANY:			
TO THE FOLLOWING:  • The irrigation water mete property line or the edge • The meter, service valve testing, and maintenance meter or meter box. Tree • The reclaimed water shall	r shall be furnished, maintaine of the sidewalk on the custon (curb stop), and meter box sh c. Landscape shrubs and grou s shall not be planted within 4 I be used only for landscape	ed and owned by the C ner's side. nall remain accessible to und cover shall remain a 4 feet of the meter. irrigation purposes.	LICATION, THE APPLICANT AGREES ity of Naples and shall be placed at the utilities personnel for inspection, at least 18 inches from the edges of duled as amended from time to time.
<ul> <li>City connection fees shal</li> <li>The property owner is res</li> <li>The property owner's irrig system can be connected potable water system is pefore the irrigation can be owner.</li> <li>The City must inspect the 239-213-5051 to request</li> </ul>	I not apply for irrigation services ponsible for connecting their spation system must be discond to the irrigation meter. Crosprohibited. And an appropriate activated. The backflow prescription system connection	ce with 1 inch meters. irrigation system to the nected from the potables connection between the backflow preventer is reventer shall be owned before service begins. Gation meter can only be	irrigation meter.  e water system before the irrigation the irrigation water system and the required on the potable water meter and maintained by the property  The contractor/ applicant must call the turned on by the City inspector.
	NTATIVE OF THE ABOV		PERTY, HAVE READ AND FULLY
APPLICANT'S SIGNATURE:			DATE:
(Note: If submitting this form elect Electronic Submittal disclaimer belo		e and date on the corresp	onding lines above. Also, please review the
form for electronic submittal requires  By checking this box, ty electronically (via email), you	s a minimum of free Adobe Reader ping your name in the app u affirm that all information ledge and you understand t	r version 11 (or greater), or olicant/citizen signatu contained within this	agreeing to the terms below. Saving this entire Adobe Acrobat Standard / Pro).  re field(s), and submitting this form document was completed truthfully, gnature is considered legally binding
UTILITY DEPT. USE ONLY			

Installation

Inspections

Receipt No.