



*This institution is an equal opportunity provider*  
City of New Meadows \* P.O. Box 324 \* New Meadows, Idaho 83654  
Phone (208) 347-2171 \* Fax (208) 347-2384

### WATER METER REPLACEMENT AGREEMENT

I understand and agree that the City of New Meadows has approved my request to replace the water meter that is currently installed at \_\_\_\_\_ (residence address). The replacement of this meter is being done at my request because of my concern regarding my water usage and the accuracy of the current meter. I understand that the City of New Meadows will monitor the water usage after the meter is replaced and will determine within \_\_\_\_\_ (to be filled in by city) days if the meter that was removed was defective. If the meter was defective, there will be no charge to my account for the replacement. If the water usage does not reflect enough change to validate the need for a new meter, I will be required to pay the City of New Meadows for the cost of the meter and the gross hourly rate for the number of hours necessary to remove the old meter and install the new one. This charge will be added to and become a part of my water bill.

\_\_\_\_\_  
Resident

\_\_\_\_\_  
Date

\_\_\_\_\_  
Received by (City)

\_\_\_\_\_  
Date