



APPLICATION FOR METER PERMIT

PLEASE PRINT

Application is hereby made for permission to (Pick One): <input type="checkbox"/> Set New Meter <input type="checkbox"/> Disconnect and Reset Meter <input type="checkbox"/> Break Seal <input type="checkbox"/> Permanently Remove Meter <input type="checkbox"/> Replace Meter	Property Description: Block: _____ Lot: _____ Property Address: _____ City/State/Zip _____ Does the building have a roof tank? Y <input type="checkbox"/> or N <input type="checkbox"/>
Information about Meter to be Removed/Repaired/Replaced/Tested: Meter Type (Select One): Displacement <input type="checkbox"/> Single Jet <input type="checkbox"/> Electromagnetic <input type="checkbox"/> Turbine <input type="checkbox"/> Meter Size: _____ Manufacturer: _____ Meter Number: _____	Information about New Meter (Complete if available): Meter Type (Select One): Displacement <input type="checkbox"/> Single Jet <input type="checkbox"/> Electromagnetic <input type="checkbox"/> Turbine <input type="checkbox"/> Meter Size: _____ Manufacturer: _____ Fire Rated: Y <input type="checkbox"/> or N <input type="checkbox"/> Meter Number: _____
Reason for work being performed:	
Which part of the building is covered by the meter?	
Building classification (eg: residential, commercial, mixed):	
Dept. of Buildings New Building #: _____ Alteration #: _____	
Is this work being performed under the Reimbursable Metering Program? YES <input type="checkbox"/> NO <input type="checkbox"/>	
"I authorize the licensed plumber named below to do the work described in this application."	
Name of Owner: _____	
Signature of Owner or Agent: _____ Date: _____	
Mailing Address: _____	
Owner Email Address: _____	
City/State/Zip _____ Phone #: ()	
"I certify that I am authorized by the owner of the premises to do the work described herein."	
Name of Applicant (Licensed Plumber): _____	
Signature of Licensed Plumber: _____ Application Date: _____	
Plumber Email Address: _____ Estimated Permit Return Date: _____	
Mailing Address: _____	
City/State/Zip: _____ Plumber's Corporation Name: _____	
License Number: _____ Plumber's CIS Account #: _____ Phone #: ()	
For Official Use Only	
Premises Account Number: _____	
Permit Type: _____ Permit Number: _____ Fee: _____	
Date Issued: _____ Reviewed By: _____ Issued By: _____	

INSTRUCTIONS

Application for Meter Permit Instructions and Notes

1. Incomplete applications will not be accepted. The only field that may be left blank is the Meter Number for the new meter.
2. Guidance on meter selection is available in DEP's "List of Approved Meters" available on our website at nyc.gov/dep. The Licensed Plumber has responsibility for installing a properly-selected water meter. Approval of this permit application does not constitute final approval of the meter.
3. Permits for new construction are valid for 365 days. Permits for meter work in existing buildings are valid for 30 days. Permits may be extended under certain circumstances if a written request is submitted before the original permit expires.
4. The completed permit must be returned within ten business days of completion of the work. A completed permit shall include:
 - a. Meter Manufacturer and Model Name/Number
 - b. Register Model
 - c. Meter Size
 - d. Meter Serial Number
 - e. Installation/Replacement/Work Date
 - f. Meter Location
 - g. Meter Manufacturer's Test Tag or Sheet
5. Licensees who receive three or more violations within a three-month period may lose their ability to receive new permits until the violations are corrected.