



## Water Meters on Fire Hydrant Policy

(Hydrant/Jumper Rates)

1. A deposit of \$1,500, as well as a non-refundable application fee of \$70, and a \$10 delivery fee, shall be paid before issuance of the meter with backflow preventer.
2. The monthly rental fee of the meter is \$57.63 per month for a 2-Inch meter or \$108.05 per month for a 3-Inch meter from day of receipt to day of return. Plus a 10% tax on water flow and water base charges.

**3. Water Rates:**

**2-Inch Meter Rates**

First 0-48	
(thousands) gallons/month.....	\$2.29 each
49-96	
(thousands) gallons/month.....	\$3.01 each
97-192	
(thousands) gallons/month.....	\$3.89 each
193+	
(thousands) gallons/month.....	\$5.74 each

**3-Inch Meter Rates**

First 0-90	
(thousands) gallons/month.....	\$2.29 each
91-180	
(thousands) gallons/month.....	\$3.01 each
181-360	
(thousands) gallons/month.....	\$3.89 each
360+	
(thousands) gallons/month.....	\$5.74 each

4. Meter connections with the appropriate backflow prevention device shall be set and removed daily.
5. The user shall provide a flag man to be present at all times if a hose crosses any road. Adequate signs shall be provided.
6. **The undersigned is responsible for the hydrant meter and backflow preventer. Equipment must be returned in a good operating condition. Any damages of the equipment's will be paid by the user.**
7. Any disputes or disagreements concerning the use of hydrant meter and backflow preventer will be resolved at the discretion of the Public Works and Utilities Department.
8. Hydrant meter readings must be submitted by the 15<sup>th</sup> of each month, or a non-reporting automatic usage fee of \$150 will be charged each month.
  - a. Send a picture of the meter reading to the [utilitycustomerservice@sanfordfl.gov](mailto:utilitycustomerservice@sanfordfl.gov), please include hydrant meter numbers.
9. Hydrant meter returns: return to 412 W 14<sup>th</sup> street. Will receive a return receipt.

The undersigned has read and agrees to the above listed conditions. **Please Print.**

Applicant Name: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Date of Issue: \_\_\_\_\_  
 Purpose of Use: \_\_\_\_\_  
 Location Address of Project: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Jeff Triplett  
Mayor

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District 1

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District 2

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District 3

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District 4

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