



DATE: _____

Application to Request Size Change - Existing Water Meter

O Name _____
W Address _____
N City, Prov _____
E Postal Code _____ Phone: _____
R e-mail: _____

S Name _____
I Address _____
T City, Prov _____
E Postal Code _____ Phone: _____
 e-mail: _____

Non-Residential? : Residential ? :

to

Non- Residential Type _____
(i.e. Hotel, Restaurant, Apartment)

Existing Meter Size to **REQUESTED SIZE FOR REVIEW**

Please list any Fire Protection Equipment that would be impacted by this change, ie., standpipe systems, sprinkler systems, etc .

Please identify if this property is covered by an existing site plan and provide details if necessary

**NOTE: It is important that you read the following and indicate that you sign prior to processing this application:
 All aspects of meter use in this application are governed by City of Niagara Falls By-Law 2016-108 as amended.**

- 1 The City requires an Engineer Stamped Drawing or Letter advising of the new meter size
 copies of Site Plans or a Site Inspection to ensure a accuracy may also be required review of specifications
- 2 A processing fee of \$100 applies, payment must be received upon receipt of application
- 3 If approved, the owner must purchase the new meter from the City and install the meter at the owners cost
- # If approved, after new meter installation,you must book an appointment with City staff to inspect, seal and remote the new meter**
- # If approved, the old meter must be returned at time of new meter seal appointment, or directly to the Municipal Service Centre
 # (3200 Stanley Av)
- 6 If approved, failure to follow steps 4. & 5. within 30 days may result in refusal rates being applied to the associated water utility account
- 7 If approved, the City can only determine suitability based on Fire requirements and/or the functionality of the meter.
 Any concerns or problems with volume of water for your operational needs is solely the owners responsibility.
- 8 Altering the size of the meter may affect functionality which cannot be guaranteed by the City and will be the owners **responsibility**

(please print name)

Signed by Owner/Agent

**** completed application must be submitted via email to meteradministration@niagarafalls.ca**

FOR OFFICE USE ONLY

| Circulation: | Comments | APPROVED: | |
|----------------|--|--------------------------|--------------------------|
| Fire: | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| | _____ | yes | no |
| Building | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| | _____ | yes | no |
| Engineering | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| | _____ | yes | no |
| Other: | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| | _____ | yes | no |
| Final Approval | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| | Manager of Water & Wastewater Services | yes | no |