

copy

Mr. David Ward
907 Huddle Rd
Napoleon, Ohio 43545

RE: Lawn Meter

Mr. Ward,

We have been informed that you are requesting removal of your 2nd Water Meter (commonly referred to as a Lawn Meter). Please see attached work order authorizing the City to remove this meter.

Please sign the work order (at the location so marked) to formally authorize this meter to be removed. In addition by signing this order you authorize the City entry on to your property for meter removal and to inspect you plumbing. Plumbing not meeting the City's standards must be corrected prior to meter removal.

Please call if you have any questions.

City of Napoleon
Utility Department
599-1235

CITY OF NAPOLEON — SERVICE ORDER

20991

TYPE OF SERVICE:

- Electric Water Sewer Street
 Police & Fire Parks & Rec. Cemetery Other

Service Order No. _____

DATE ISSUED: 10-15-99	NAME: WARD, DAVID	TENANT: WARD, DAVID	OWNER: WARD, DAVID	ACCT. NO.: 25*229*1
TIME ISSUED: 14:15:49	ADDRESS: 907 HUDDLE RD			PHONE NO.:

COPY

WORK REQUISITION

INSTRUCTIONS:

**PLEASE REMOVE LAWN METER-THIS SUBJECT TO
 INSPECTION AFTER REMOVAL TO MAKE SURE WATER
 IS NOT IMPROPERLY DIVERTED
 *EXECUTING THIS ORDER AUTHORIZES ENTRY AND
 INSPECTION. PLEASE SIGN BY THE "X" & RETURN
 TO THE CITY'S UTILITY OFFICE AT 255 EAST
 RIVERVIEW AVE. NAPOLEON, OHIO 43545**

METER LOCATION & INFORMATION

METER NO.	BILL DATE	READ DATE	BEG READ	END READ	CONS
Electric - #	09-20-99	09-07-99			
Water - #	09-20-99	09-07-99	6	9	3
ROM/Pro-Read - #	0047553279				
Remarks:					

REMOVED

INSTALLED

TYPE	NUMBER	DATE	READING	NUMBER	DATE	READING
Electric						
Demand						
Reactive						
Phase & Multiplier						
Electric Wtr. Htr.						
Water Meter						
I.D. No.						
Meter Size						
Hose Meter						

COMMENTS:

Is This Work Billable? <input type="checkbox"/> Y <input type="checkbox"/> N (If Yes, complete billable information)	FOR TURN OFF USE ONLY
TV Cable Installed? <input type="checkbox"/> Y <input type="checkbox"/> N (If Yes, include on billable information)	Knocked on Door <input type="checkbox"/> ___ / ___ / ___
AUTHORIZED BY:	Time _____ AM PM
SERVICE PERFORMED BY:	Meter Reading:

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DATE:

Time _____ AM PM

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Meter Reading:

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