



DEDUCT METER PERMIT APPLICATION

688 Sugartown Road, Malvern, PA 19355

Phone: 610-647.5300 Email: permits@willistown.pa.us

A SIGNED COPY OF THE CONTRACT MUST BE SUBMITTED WITH APPLICATION

Administrative Use Only

UPI No.: 54- _____ - _____

Meter Serial No.: _____

Permit No.: _____

Deduct Meter Application Instructions:

Willistown Township requires that a Township-approved and supplied meter be installed to calculate usage for customers per §105-17.A(2) of the Township Code.

1. Property Owner/ Site Location Information:

Address _____ City _____ State _____ Zip _____

Print Name(s) _____

Email Address _____ Home Phone _____ Cell Phone _____

I hereby authorize the licensed contractor named below to make this application and complete installation of the Deduct Meter as proposed on this application and outlined in the attached contract which conforms to all applicable laws of this jurisdiction.

Property Owner(s) Signature(s) _____ Date _____

2. Contractor Information:

Name of Company _____ PA HIC No. _____

Address _____ City _____ State _____ Zip _____

Email Address _____ Phone _____

Certificate of Insurance Attached **AND** Copy of PA Home Improvement License Attached

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her agent and we agree to conform to all applicable laws of this jurisdiction.

Contractor's Signature _____ Date _____

3. Attach documentation of proposed work. RISER DIAGRAM MUST BE ATTACHED. (P3005.4) All hose bibs must be identified. Water distribution calculations may be required. (P2903; 2018 IRC; 2018 IPC)

4. Cost of Project _____ (labor and materials)

Current Sewer Connection Type (check one)

Low-Pressure Gravity

Please do NOT write below this line

Permit # _____ Date Received _____ Date Issued _____ Amount Paid \$ _____

Code Administration Officer _____ Date _____

Approved _____ Reason for Disapproval _____