



MERIDIAN SERVICE METROPOLITAN DISTRICT
 Water, Wastewater, Parks and Recreation
 11886 Stapleton Dr, Falcon, CO 80831
 719-495-6567, Fax 719-495-3349

TAP REQUEST FORM

MANDATORY 48 HOURS NOTICE REQUIRED TO PROCESS THIS TAP REQUEST

Email Completed Form to AR@meridianservice.org

Date _____

Owner Name (if different than Builder) _____

Builder Name _____

Builder Contact Information:

(Mailing Address – for hard copy of original Tap Receipt) _____

(Phone) _____

(Email –Point of Contact relating to this Tap Request) _____

(Email – Administrative Contact) _____

Tap Location (Address) _____

Subdivision/Filing/Lot # _____

Tap Size Requested (Circle One): $\frac{3}{4}$ " 1" 1 1/2" 2" Other: _____

Desired Payment Method (Circle One): ACH WIRE TRANSFER

DOCUMENTATION ENCLOSED: _____ (REQUIRED) Settlement Statement (for verification of the address/legal description of the Property where the tap is located and where the meter will be set)

FOR OFFICE USE ONLY:

_____ (Water Tap Fee) + _____ (Sewer Tap Fee) + _____ (Meter Fee) = _____ TOTAL DUE

Notification/Invoice Generated: _____ (date/time)

Confirmation of Fees Received in Full: _____ (date) - **TAP RECEIPT NUMBER #** _____

Tap Receipt Emailed _____ (date/time) - Original Tap Receipt Mailed _____ (date)