



# MHOG Utilities

2911 Dorr Road • Brighton, MI 48116 • 810-227-5225

## Hydrant Meter Rental Agreement

DATE \_\_\_\_\_ HYDRANT NO. \_\_\_\_\_

SITE ADDRESS/LOCATION \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ CELL NUMBER \_\_\_\_\_

WATER WILL BE USED FOR \_\_\_\_\_

RENTAL PERIOD \_\_\_\_\_  
(≤30 days, ≤ 60 days, ≤90 days, ≤120 days, Fees Vary Based on Rental Period)

DEPOSIT AMOUNT \_\_\_\_\_  
(\$1,000 for 1-inch Meter, \$1,500 for 3-inch Meter, \$150 for Stand)

METER # \_\_\_\_\_ OUTGOING READ \_\_\_\_\_

INCOMING READ \_\_\_\_\_ GALLONS USED \_\_\_\_\_

A deposit is required for temporary use of a water meter. Upon completion of use, the meter is to be returned to Genoa Township. At such time the meter will be inspected to insure working order. A billing for the rental, water usage, and any damage will be calculated for the applicant at rates set forth in attached return form. The amount due will be deducted from your deposit and either a refund check or invoice for the balance will be mailed to you. The person renting the meter is responsible for the meter. You will also need to pump the hydrant down after every use each day freezing temperatures exist.

**By signing this agreement, applicant has read and agrees to the above conditions, and will pay the applicable fees in the attached hydrant return form upon return.**

\_\_\_\_\_  
Applicant Authorized Signature

\_\_\_\_\_  
MHOG Representative Signature

Check # \_\_\_\_\_ (Make payable to MHOG Utilities & attach a copy to this form)

\*\*\*\*\*

FOR QUESTIONS, Contact the MHOG Utility Dept. at: 810-227-5225, Monday-Friday, 9:00 a.m.-5:00 p.m.



## MHOG Hydrant Rental Meter Return Form 2015

Return Information	
Date Out: _____	Date Returned: _____
Total Days Rented: _____ (Note: First 30 Days No Additional Charge)	
Renter's Company Name: _____	
Name of MHOG Employee Checked In By: _____	
Meter # _____	Stand Out With Meter: _____ Yes _____ No
Outgoing Read: _____	Returned Read: _____
Total Gallons Used (in 1,000 gals.): _____	
Determination of Charges	
Total 1,000 Gallons Used: _____ x \$7.25/1,000 Gallons	\$ _____
Days ( 0 - 30 ) \$0 _____      Days (30 -60) \$75 _____	
Days (60 - 90) \$150 _____      Days (90 - 120) \$200 _____	\$ _____
Days Out Beyond Indicated Days @ \$5.00 per day	\$ _____
1-Inch Meter Returned Okay: _____ Yes _____ No _____ NA ( Replace @\$300)	\$ _____
3-Inch Meter Returned Okay: _____ Yes _____ No _____ NA ( Replace @\$825)	\$ _____
1-Inch RPZ Returned Okay: _____ Yes _____ No _____ NA ( Replace @\$275)	\$ _____
2-Inch RPZ Returned Okay: _____ Yes _____ No _____ NA ( Replace @\$517)	\$ _____
Meter Stand Return Okay: _____ Yes _____ No _____ NA ( Replace @\$139)	\$ _____
Ball Valves on RPZ Okay: _____ Yes _____ No _____ NA ( Replace @\$10)	\$ _____
2" NPT Pipe Nipples Okay: _____ Yes _____ No _____ NA ( Replace @\$10)	\$ _____
<b>Total Charges</b>	<b>\$ _____</b>
<b>Less Deposit</b>	<b>\$ _____</b>
<b>Amount:      _____ Refund      _____ Due</b>	<b>\$ _____</b>
Customer Signature _____	Date: _____