

Logan Water - Application for Water Meter Consumption / Accuracy Test - 2009/10

Logan City Council
PO Box 3226, LOGAN CITY DC QLD 4114
Phone: (07) 3412 5494
Fax: (07) 3412 3444
Website: www.logan.qld.gov.au
Email: council@logan.qld.gov.au
ABN: 21 627 796 435



LoganWater LOGAN CITY COUNCIL

Section 1 - Applicant details

Application no: _____

(Office use only)

Applicant's name: _____

Company name: (if applicable) _____

Phone no: _____ Mobile no: _____

Fax no: _____ E-mail address: _____

Postal address: _____

Postcode: _____

I hereby make application as Owner / Authorised Agent of Residential Premises / Industrial Premises / Commercial Premises
(Please circle one) (Please circle one)

for permission to carry out work at the premises below.

Applicant's signature: _____ Date: _____

Section 2 - Site details

Street address (Include no., street, suburb/locality & postcode)

Property no.: _____

Lot & plan details (Real property description)

WATER CONSUMPTION TEST - NO GST APPLIES

\$110.00 Meter tested on site (Deposit refunded if meter is found to be faulty)

METER ACCURACY TEST FEES - NO GST APPLIES

\$445.00 Test 20mm by independent body (Deposit refunded if meter found to be faulty)

\$445.00 Test 25mm by independent body (Deposit refunded if meter found to be faulty)

\$488.00 Test 32mm by independent body (Deposit refunded if meter found to be faulty)

\$488.00 Test 40mm by independent body (Deposit refunded if meter found to be faulty)

\$519.00 Test 50mm by independent body (Deposit refunded if meter found to be faulty)

\$519.00 Test 80mm by independent body (Deposit refunded if meter found to be faulty)

\$577.00 Test 100mm by independent body (Deposit refunded if meter found to be faulty)

Fees remain effective until 30 June 2010

Office use only

Water meter details

Serial number of meter: _____ Last reading: _____

Report details

Make/model/size: _____

Amount: \$	Receipt no:	Date:
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Meter Tested on Site		
Date of Test:		
Meter on site		
Start reading:	End reading:	Total:
Test Meter		
Start reading:	End reading:	Total:
Percentage (%) of Error:		
Name of Testing Officer (1):		
Signature of Testing Officer (1):		
Name of Testing Officer (2):		
Signature of Testing Officer (2):		