DESERT WATER AGENCY APPLICATION FOR TEMPORARY SERVICE

Application is hereby made for temporary water service from the Desert Water Agency.

It is understood that the temporary service, whether from a fire hydrant or otherwise, is subject to the following conditions:

1. Service may be discontinued during any emergency for the duration of the emergency.
2. Service is not transferable.
3. Service shall be disconnected and terminated within six months after installation unless a written request for extension is made to the Agency.
4. Applicant shall be held responsible for loss or damage to the meter and/or attachments.
5. Applicant may use water from a hydrant after the water has passed through a Desert Water Agency fire hydrant meter and backflow device. Any direct connection to the hydrant or attempt to bypass the meter or backflow device will result in the confiscation of contractor’s equipment which may be attached and a charge of $520.00 for disconnect, processing and water use. Applicant is responsible for notifying all employees and subcontractors of this policy.
6. The undersigned agrees to comply with all Agency Rules and Regulations, and to protect, indemnify and save harmless the Desert Water Agency, its agents and employees, from any claim, personal injury, loss or damage, including court costs and attorney’s fees, arising out of the use of Desert Water Agency equipment or water. Desert Water Agency shall be entitled to recover its expenses, including attorney’s fees, incurred in enforcing this Agreement.

Applicant Information and Agreement

Company Name: __________________________________________

Authorized Representative for Above Company: ____________________________

Print Name:__________________________ Phone #:__________________________

Sign:__________________ Date:__________________

Project Information

Description of Work:________________________________________

Project Address or APN (if Applicable):______________________________

ARE YOU A SUB-CONTRACTOR?

( ) YES (Fill out below):
Contact Information for General Contractor

General Contractor Name:____________________________________

Address:________________________________ City:____________ State:____ Zip:________

Contact Name:________________________________ Phone #:____________________

( ) NO (Fill out below):
Contact Information for Project/Property Owner

Project/Property Owner Name:____________________________________

Address:________________________________ City:____________ State:____ Zip:________

Contact Name:________________________________ Phone #:____________________