



CENTERVILLE- OSTERVILLE-MARSTONS MILLS WATER DEPARTMENT

PO BOX 369
1138 MAIN ST., OSTERVILLE, MA 02655
PH. (508)428-6691 FX (508)428-3508
WWW.COMMWATER.COM

APPLICATION FOR IRRIGATION METER

ACCOUNT No. _____ SERVICE ADDRESS: _____

OWNERS NAME: _____
LAST NAME FIRST NAME

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

PLUMBERS NAME: _____
LAST NAME FIRST NAME

MA LICENSE #: _____

PHONE #: _____

COMPANY NAME: _____

CHECK ALL THAT APPLY:

TYPE OF PROPERTY SINGLE FAMILY ☐ MULTI FAMILY ☐ COMMERCIAL ☐

METER USE LAWN/PLANTS ☐ POOL ☐ OTHER ☐

I hereby certify that the information provided on this form is accurate and complete and that all charges and fees owed on this property to C-O-MM WATER DEPARTMENT are current and paid in full. I agree to abide by all the municipalities' rules and regulation governing the use of water meters as well as all relevant ordinances, rules and regulations.

Owners signature _____

Date

Owners Cell _____

OFFICE USE ONLY : METER INFORMATION

Manufacturer _____ Meter No. _____ ERT _____ Start read _____