



**Development Services Office**  
 700 Fifth Ave, Suite 2748 | PO Box  
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 (206) 684-3333 • [SPU\\_DSO@seattle.gov](mailto:SPU_DSO@seattle.gov)

# Water Meter Reset Application

## PROPERTY OWNERS REQUESTING A WATER METER RESET MUST

- Complete this Water Meter Reset application completely, accurately, and legibly.
- Provide full payment of all charges for the new water meter installation.  
*Please note: Full payment is required before the meter will be installed. New billing for water and sewer utilities will begin on the date the meter is installed.*

## SUBMIT YOUR APPLICATION – Use one of the following options:

- Email (preferred): Send **signed** pdf application to: [SPU\\_DSO@seattle.gov](mailto:SPU_DSO@seattle.gov)
- Mail: Development Services Office, Seattle Public Utilities, PO Box 34018, Seattle, WA 98124

## WHAT HAPPENS NEXT

After you submit your application, a Project Coordinator will contact you with the next steps. You will receive an invoice once the Project Coordinator determines the application is complete. For more information, please visit [seattle.gov/utilities/construction-and-development/dso/water-service](http://seattle.gov/utilities/construction-and-development/dso/water-service).

## APPLICANT & PROJECT INFORMATION

Service Address \_\_\_\_\_ Water Service Size/Type \_\_\_\_\_ Billing Account # \_\_\_\_\_ Account Balance \_\_\_\_\_

↓	FINANCIALLY RESPONSIBLE PARTY	PROPERTY OWNER <i>(If different from Financially Responsible Party)</i>	PROJECT CONTACT <i>(If different from Financially Responsible Party)</i>
Company			
Name			
Mailing Address			
Telephone			
Email			

## ACKNOWLEDGEMENT

I, the undersigned owner or owner authorized representative agree to comply with all rules and regulations of Seattle Public Utilities relating to this new water meter installation at the premises identified above. Further, if I am a representative of the owner, I certify that I am authorized by the owner to sign this Water Meter Reset Application on the owner's behalf.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Relationship to Financially Responsible Party