



Water Meter Application

Town of Ocean City

P& Z Dept. 410-289-8825 * jgerthoffer@oceancitymd.gov
 Billing Dept. 410.289.8833 * myocwaterbill@oceancitymd.gov
 Water Dept. 410.524.8388 * sandersen@oceancitymd.gov

Applicant Information				
Applicant Name:			Project Name:	
Phone Number:		Email Address:		
Tax ID			Building Permit Number:	
Map	Parcel	Lot	Block	Section
Type of Project: <input type="radio"/> Single Family <input type="radio"/> Multi Family <input type="radio"/> Business <input type="radio"/> Commercial <input type="radio"/> Mobile Home ___ Units ___ Floors				
Property Address:				
Ocean City		Maryland		21842
Billing Information (if different than Property Address)				
Billing Address:				
City:		State:		Zip Code:
Water Meter Information				
Estimated Domestic Flow _____ gpm			Estimated Fire Flow _____ gpm	
Number of Fixture Units from Wastewater Dept. _____			Service/Meter Size applied for _____ inches	
Water Meter Connection Information and Fees				
Meter Size	Connection Deposit		Fee Paid	
1"	\$1,450		\$	
2"	\$4,200		\$	
3"	\$8,000		\$	
4"	\$10,000		\$	
6"	\$16,000		\$	
8"	\$20,000		\$	
10"	\$26,000		\$	
A deposit is required for installation. The deposit amount is billed against actual time and material.				
Applicant Authorization				
Application is hereby made for the above described water service				
Applicant Name				
Signature X			Date:	
Town of Ocean City Approvals				
Application reviewed and approved by Planning and Community Development				
Signature X			Date:	
Installation approved by Billing Department				
Signature X			Date:	