

NOTICE OF NEW INSTALLATION OR RELOCATION

Utility Meter/ Backflow Device/ or Pressure Vessel

TYPE OF UTILITY METER: Water <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/>		Is This A Master Meter? <input type="checkbox"/> Or A Sub-Meter? <input type="checkbox"/>
TYPE OF PRESSURE VESSEL- please see legend: Air Tank <input type="checkbox"/> Expansion Tank <input type="checkbox"/> Water Heater <input type="checkbox"/> Boiler <input type="checkbox"/> Heat Exchanger <input type="checkbox"/> Other _____		
BACKFLOW PREVENTION DEVICE:		
Device Size:	Device #	
Address & Room Number/ Detailed Description Of Device Location: (If relocation, please describe where removed from and relocated to.)		
Date Of Installation or Relocation:		
Who Will Receive Service From This Device?		
Why Was Installation Required?		
Is Installation Permanent? <input type="checkbox"/> Or Temporary? <input type="checkbox"/> If Temporary, How Long Will It Be Needed?		
Notes:		
Requesting Organization Or Project Number:	Business Unit Charged:	
Request Submitted By: Phone Number:		
Please submit completed form via email to RonEasley@PortofPortland.com List "Notice of New Installation" in the subject header. Aviation Facilities, Contract Administration (503) 460-4359		
CONTRACT ADMINISTRATION USE ONLY Account # _____ Follow up date: _____		