



**City of Le Sueur, MN**  
**2025 Hydrant Meter Request Application**  
 \$1000 Deposit

Please complete and return this form and meter deposit to City Hall

APPLICANT INFORMATION	
<b>Company Name:</b>	
<b>Company Address:</b>	<b>City/State/Zip:</b>
<b>Company Phone:</b>	<b>Contact Phone:</b>
<b>Contact Name:</b>	<b>Contact Email:</b>

PROJECT INFORMATION	
<b>Purpose:</b>	
<b>Date Requested:</b>	<b>Return Date:</b>
<b>Hydrant Location:</b>	<b>Cross Street:</b>

NOTES TO APPLICANT		
<p>City personnel will install the meter, activate hydrant and applicant will use gate valve installed after meter. Standard connection end is 2.5" NST male fitting. Adaptors are not supplied. Please plan accordingly.</p> <p>Deposit will be returned 6 to 8 weeks after meter is returned less any damages, missing part(s) costs, and water bills due.</p> <p>Contact the Water/Wastewater Department Manager at 507-593-8373 with any questions.</p> <p>I hereby request the City of Le Sueur to supply water on a temporary basis for the duration and location stated above. I agree to be responsible for any damage to the hydrant and the meter components and any water used through the meter. I agree to pay the rates and fees as approved by the City of Le Sueur.</p>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">           _____  <b>Signature of Applicant or Authorized Representative</b> </td> <td style="width: 40%; border: none;">           _____  <b>Date</b> </td> </tr> </table>	_____ <b>Signature of Applicant or Authorized Representative</b>	_____ <b>Date</b>
_____ <b>Signature of Applicant or Authorized Representative</b>	_____ <b>Date</b>	

OFFICE USE ONLY	
<b>Date Received:</b>	<b>Deposit Paid:</b>
<b>Approved By (Must be Approved by Water/Wastewater Department):</b>	<b>Date Approved:</b>