

Charter Township of Michigan
Department of Public Works
2020 Seasonal Sprinkler Meters
BergerH@WashingtonTwpMi.org

<p>EMAIL is the preferred method for sending and receiving all documents and communication. Alternatively, you may MAIL documents to Washington Township Hall- DPW.</p>	
<p>Complete each step listed below</p>	
1.	Any and all previous charges on the account must be paid in full.
2.	Send completed and signed 2020 Memorandum of Understanding to DPW.
3.	Provide DPW with accurate billing and contact information.
4.	<p>Have your representative go to the backflow device and visually verify that the backflow device is:</p> <ol style="list-style-type: none">1. on-site, and2. appears undamaged by freeze or theft <p>and then notify DPW of their findings.</p> <p><i>This is <u>not</u> the same as a backflow test and may not require a contractor to perform!</i></p>
5.	Notify DPW that you are ready for meter installation.
<p>↑↑ ALL STEPS LISTED ABOVE ARE <u>REQUIRED PRIOR</u> TO METER INSTALLATION ↑↑</p>	
6.	<p><u>After the meter has been installed</u>, have an ASSE certified tester complete and submit a backflow test <u>PROMPTLY AFTER THE METER IS INSTALLED*</u> but no later than July 1st.</p>
7.	No later than July 1 st , submit the completed backflow test to DPW.

* Indicates new for 2018



Charter Township of Washington
Department of Public Works

57900 Van Dyke • Washington • Michigan • 48094-4067
(586) 786-0010 ext 2002 • Email- DPW@WashingtonTwpMI.org

2020 MEMORANDUM OF UNDERSTANDING
for seasonal meter use

Development name: _____

Customer's legally authorized representative: _____
PRINT NAME

Location of meter(s) _____

- The Charter Township of Washington and the Customer want to help our community maintain affordability of public water while caring for valuable landscaping.
- This document signifies the Customer's agreement to comply with the Township's specifications for use of the public water supply, as specified below.

MANDATORY RULES OF WATER USAGE

Memorial Day through Labor Day

Water can only be used between the hours of 11:00 pm and 4:00am

- There is a fee of \$120 per meter per year to install and remove the meter. Each account will be billed monthly for usage and fees. Delinquent balances will be added to the Winter Property Taxes of the each member of the community or development which the meter services. The Customer is responsible for providing accurate billing contact information.
- Water use is restricted to the hours of 11:00pm to 4:00am. Noncompliance, without prior written permission from the Township, can result in meter removal. If the meter is removed due to non-compliance, an additional \$120 per meter fee will be required in advance of service restoration. The Department of Public Works (DPW) Director has the authority to fine violators and/or further restrict the Customer's water usage in the event of extreme daily or hourly usage or an emergency per Ordinance.
- Backflow assemblies must be tested **PROMPTLY AFTER METER INSTALLATION BUT NO LATER THAN July 1, 2020 by an ASSE certified tester.** Noncompliance, without prior written permission from the Township, can result in meter removal. If the meter is removed due to noncompliance, an additional \$120 per meter fee will be required in advance of service restoration. If a backflow test is not completed, installation of meter(s) and terms of use in subsequent years will be at the sole discretion of the DPW Director.
- It is unlawful for any person to alter or disturb any public water system component including, but not limited to, the water stop/curb box, water meter(s), and reading equipment. Any loss, damage, or expense that is suffered by the Township of Township owned components of the public supply system shall be assessed against the community/development's property owner(s).
- The Township is not, in any way, responsible for any form of loss, damage, or expense that is suffered or incurred as a result of the Customer's, or contractor of Customer's, failure to properly install, repair and/or maintain any/all components of the Customer's system which includes, but is not limited to the backflow assembly, pressure reducing valve, supply line before and after the meter, and valves before and after the meter.
- *Before the meter gets installed-* The Customer's backflow assembly(s) must be installed and, at minimum, appear to be operational. Backflow assembly testing cannot be completed until after meter installation.
- *Winterizing and Freeze Damage-* The Customer, or Customer's contractor, **cannot** winterize your sprinkler system until after the Township has removed the meter.
- If at any time, the Customer, or Customer's contractor, has any questions about the ownership, responsibilities, procedures and/or policies of this Township, they must contact the Township directly. In case of after hours emergency, the DPW can be immediately contacted at the emergency number available on our website and on our recorded phone message.

The undersigned representative acknowledges that he/she has read and understands the entirety and intent of this agreement and has full power and authority to enter into this agreement on behalf of the above named community/development(s).

Legally authorized representative: _____ Date: _____
(SIGNATURE)

Printed Name: _____ Best Phone: _____

Email address: _____ Alt. Phone: _____

2nd Contact Name: _____ Best Phone: _____



Charter Township of Washington Department of Public Works Backflow Assembly Test Report

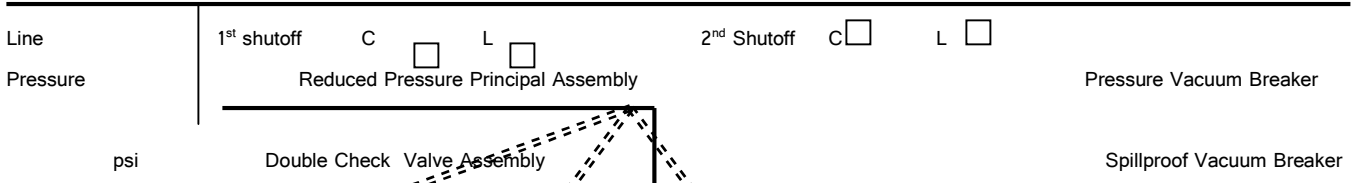
57900 Van Dyke • Washington • Michigan • 48094-4067
(586) 786-0010 • email to DPW@WashingtonTwpMI.org

Due Date: _____

Contact: _____
 Facility: _____ Account #: _____
 Address: _____ City: _____
 Date of Test: _____

SECTION 1. Device Information

Location _____ Type of Assembly: _____ Model #: _____
 Manufacturer: _____ Size: _____ Serial #: _____



SECTION 2. First Test

	1 st Check C <input type="checkbox"/> L <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>	2 nd Check C <input type="checkbox"/> L <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/> Confirm <input style="width: 50px;" type="text"/>	Relief O <input type="checkbox"/> M <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>	Air Inlet O <input type="checkbox"/> M <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>	Check C <input type="checkbox"/> L <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>
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Pass **Fail** If 1st test passed, go to Sec. 5, otherwise complete Sections 3-6. ****NOTE: All failed tests are req. to be submitted.**

SECTION 3. Repairs

Repairs if necessary _____

SECTION 4. Final Test

	1 st Check C <input type="checkbox"/> L <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>	2 nd Check C <input type="checkbox"/> L <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/> Confirm <input style="width: 50px;" type="text"/>	Relief O <input type="checkbox"/> M <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>	Air Inlet O <input type="checkbox"/> M <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>	Check C <input type="checkbox"/> L <input type="checkbox"/> PSID <input style="width: 50px;" type="text"/>
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Pass **Fail**

Notes: _____

SECTION 5. Certification On this date the above device was tested per applicable codes and the required performance standards.

Tester Name: _____ Tester Certification #: _____
 Testing Firm: _____ Testing Firm Phone #: _____
 Testing Firm Address: _____
 Tester Signature: _____ Date: _____

SECTION 6. Gauge

Make: _____ Model: _____
 Serial #: _____ Date of last Calibration: _____

Original Approval: 04/18/2013
 Revision Level: 02
 Revision Date: 03/29/2017