

METER CHECK APPLICATION

Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Renter/Applicant: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Directions to site: \_\_\_\_\_

Township: \_\_\_\_\_ Parcel # \_\_\_\_\_ (if

you do not know the parcel #; it can be found on our website @ franklincounty.in.gov.-Assessor-aerial maps- type in your first and last name in the search box-or its located on your tax statement

Job Address: \_\_\_\_\_

Utility: \_\_\_\_\_ Size of Service: \_\_\_\_\_

New Service, Upgrade or Reconnecting (Circle one)

X \_\_\_\_\_  
Applicant/Renter/Contractor or Owner Signature (circle one)

**SOMEONE MUST BE PRESENT FOR THE INSPECTION TO TAKE PLACE.**

**OFFICE USE ONLY**

Receipt #: \_\_\_\_\_

Released by: \_\_\_\_\_ Date Inspected: \_\_\_\_\_

Released to: \_\_\_\_\_ Date Released: \_\_\_\_\_

Payment type: Cash \_\_\_\_\_ Check # \_\_\_\_\_ Date Paid: \_\_\_\_\_

Contacted by: \_\_\_\_\_ To be paid by: \_\_\_\_\_

Make checks payable to: Franklin County Area Planning  
Address: 1010 Franklin Avenue, Room 107  
Brookville, IN 47012  
Phone: 765-647-5731  
Fax: 765-647-3000

Thank you for helping us help you☺