



UBC Energy & Water Services
 2040 West Mall, Vancouver, BC V6T 1Z2
 Tel: (604) 822-9445 Fax: (604) 822-8833

BUILDING TURNOVER INFORMATION FOR UTILITIES

Please **contact our office for a final meter read** and complete Parts 1, 2 and 3 in full. Return this form and accompanying materials to the address/fax above to the attention of the Mechanical Utilities Manager. For assistance please call Erin Kastner at (604) 822-1333.

DATE OF BUILDING TURNOVER (DD-MM-YY) _____

PART 1 – Contact Information of Person Completing Form

Name: _____ Company Name: _____
 Tel: _____ Alternate: _____

PART 2 – Building Contact and Customer Billing Information

Building Name: _____
 Building Address: _____
 Building Contact Name: _____ Title: _____
 Contact Phone #: _____

Customer Billing Information

Contact Name: _____ Contact Phone #: _____
 Company: _____
 Mailing Address: _____

PART 3 – Checklists

a) Backflow test reports attached?

- | |
|---|
| <input type="checkbox"/> Drinking water supply |
| <input type="checkbox"/> Fire Protection |
| <input type="checkbox"/> Irrigation |
| <input type="checkbox"/> Outside irrigation chamber |

b) Water meter pro-read installed?

- | | | |
|------------------------------|-----------------------------|--|
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | If no, provide expected date of installation and a key for temporary access to meter (security deposit will not be returned until this requirement is met) |
| | | (DD-MM-YY) _____ |

c) Temp backflow device returned to Energy & Water Services? YES NO

Office use only: Date Readings Taken (DD-MMM-YY): _____

SERVICE	METER LOCATION*	SERIAL #	READING		
			(High)	(Low)	Pro-read working? (Y/ N)
WATER					
GAS					
ELEC					(mx. dem.)
STEAM			(GT)		