

## Hydrant or Temporary Meter Permit Application

| Job and Applicant Information   |                           |             |            |
|---|---------------------------|-------------|------------|
| Job Address:  | Work Type:                | Residential | Commercial |
| Job Description (Scope of Work):  |                           |             |            |
|   |                           |             |            |
| Applicant Name (Business name if contractor):   | Contractor Property Owner |             |            |
| Address:  | City:                     | State:      | ZIP Code:  |
| Business Phone:   | Email:                    |             |            |
| Contact Name:   | Contact Phone:            |             |            |
| Complete this section if not licensed under applicant's name                                      |                           |             |            |
| Master Plumber Name:  | License #:                |             |            |
| Hydrant Permit (Complete the following section only if you need a Hydrant Permit)                 |                           |             |            |
| Permit Type: Contractor Garden Water Fill Static  | on Other                  |             |            |
| Hydrant permits will require the creation of a customer billing account.                          |                           |             |            |
| Account Holder Name:  | Address:                  |             |            |
|   |                           |             |            |
| Temporary Meter Permit (Complete the following section only if you need a Temporary Meter Permit) |                           |             |            |
| Temporary meter permits will require the creation of a customer billing account.                  |                           |             |            |
| Account Holder Name:  | Address:                  |             |            |
|   |                           |             |            |
|   |                           |             |            |
| Water Service Line Size:  | Couplings/equipmer        | nt needed:  |            |
|   |                           |             |            |
| CERTIFICATION STATEMENT   |                           |             |            |

By checking this box, I hereby certify I am authorized to make this application; all information provided on this application or in other submittals is true and accurate to the best of my knowledge; authorization from the owner to perform the proposed work has been granted; all work performed as part of any permit will comply with all applicable state and municipal laws and ordinances, and any required contractor license, personal license, or certificate of competency will be obtained prior to any work being performed. I understand that the issuance of a permit does not grant any contractor license, certificate of competency, business license, or other license, and unlicensed persons shall not be hired to perform work that requires a license or certificate of competency.