

SERVICE HYDRANT USE PERMIT

This permit is valid for the period indicated: From: _____ 20____ to: _____ 20____

Customer Section - Please Print

Company Name _____ Project _____

Mailing Address _____ City _____ Postal Code _____

Contact Person _____ Phone # _____ Fax # _____

Email Address _____

<p>Water Distribution Use Only</p> <p>(minimum 30m³/day without provision of weekly read)</p> <p>will apply as per Utility Bylaw Schedule B</p> <p>Permit Fee _____ X \$ 100.00 = \$ _____</p> <p>Water Charges/Usage _____ m³ X \$ 2.22 = \$ _____</p> <p>Meter S/N _____</p> <p>Read In _____ Out _____</p> <p>Loads # _____</p> <p>Subtotal \$ _____</p> <p>GST \$ _____</p> <p>Total \$ _____</p> <p>Hydrant Use Permit Signed <input type="checkbox"/></p> <p>Hydrant Meter Box Deposit \$ 3,000.00 <input type="checkbox"/></p>	<p style="text-align: center;">Conditions</p> <p>A Fee As Described In The Utility Bylaw 3606/A-2019 Schedule B & D Will Be Charged For Each Hydrant Use Permit.</p> <p>Water Consumption Will Be Charged To The Contractor At The Rates Described In Utility Bylaw 3606/A-2019 Schedule B Water Rates.</p> <p>Hydrant Use Is Restricted To The Fire Hydrant(s) And Projects Indicated On This Permit <u>Only</u>.</p> <p>Usage Fees For The <u>Water Meter/ Rp Backflow Device</u> Will Be Charged Using A Daily Prorated Rate From Utility Bylaw 3606/A- 2019 Schedule B Water Rates.</p> <p>All Units Loading Water Must Have Top Loading Air Gap Fill Points.</p> <p>One (1) Permit Is Required For Each Unit.</p> <p>Permit Is Only Valid During The Dates Shown On This Permit.</p> <p>A Hydrant Wrench Designed For Fire Hydrants Is Required. <u>Pipe Wrenches Are Not Acceptable</u>.</p> <p>Fire Hydrants Must Be Operated Following Swp 040, Operating Fire Hydrants (Contractors).</p> <p>The Fire Hydrant(s) Listed Above May Be Used To Obtain Water, Between The Hours Of 7:00 A.M. And 9:00 P.M.</p> <p>The Contractor Will Provide Environmental Services A Completed Copy Of The Water Usage Sheet, On A Weekly Basis.</p> <p>The Contractor Is Responsible For Following These Procedures And May Be Held Liable For Damage Or Repairs To The Fire Hydrant And Attached Infrastructure, And Have Other Enforcement Actions Taken Against Them For Not Adhering To These Procedures.</p> <p>Failure To Comply With These Conditions Will Result In Cancellation Of This Permit.</p> <p>Additional Fees For Winter Fire Hydrant Maintenance Will Be Levied For After Hour Usage.</p> <p>Load counts must be submitted <u>every 2 weeks</u>.</p>
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I _____ Represent the Company Listed Above And Agree To All The Above Conditions of This Permit. I agree to pay the following noted service(s) as per Schedules B and D of the Utility Bylaw.

Print Name: _____ **Signature:** _____ **Date:** _____

Approval Date: _____ **Print Name:** _____ **Approved By Signature:** _____

**SERVICE HYDRANT USE PERMIT
VEHICLE/TANK INSPECTION**

Company Name _____ Inspection Date: _____, 20____

Make / Model of Unit _____ License Plate _____

Unit Number _____ Capacity _____ m³ Project _____

Inspected By _____ (PLEASE PRINT) Signature _____

UNIT CHECK

	YES	NO
Unit Has Top Loading Air-Gap System	<input type="checkbox"/>	<input type="checkbox"/>
Unit Has A Hydrant Wrench Designed For Fire Hydrants	<input type="checkbox"/>	<input type="checkbox"/>
Proper Connection for the Fire Hydrant or Meter	<input type="checkbox"/>	<input type="checkbox"/>
Operator Given A Copy of Swp 040 (Operating Fire Hydrants)	<input type="checkbox"/>	<input type="checkbox"/>
Unit Operator Understands Swp 040	<input type="checkbox"/>	<input type="checkbox"/>
Hydrant Use Sticker Issued	<input type="checkbox"/>	<input type="checkbox"/>
Water Meter/Backflow Device Issued	<input type="checkbox"/>	<input type="checkbox"/>
Water Meter/Backflow Device Number	_____ Read _____	

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WATER USAGE

This sheet and schedule "A" must be sent by fax or email to the Environmental Services Department, attention Water Distribution, **every week that the permit is valid and at the end of the permit date.** A **minimum of 30m3 of usage** will be charged per day if weekly meter reads are not submitted.

Fax Number: 403.314.5835

Email to: water@reddeer.ca

For The Week Ending _____ 20__ Unit Number _____

Company Name _____ Project _____

ID Number of Hydrant Used & Hydrant Location (Use Schedule A)

Hydrant Meter # _____

Start Read _____

End Read _____

WEEKLY LOAD LOG

	MORNING	AFTERNOON	EVENING	TOTAL
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

Total _____

SCHEDULE A

Date	Hydrant Id #	Location	Loads

Submitted By _____
(PLEASE PRINT)

Signature _____