



HYDRANT USE PERMIT METERED

10602 SE 129<sup>TH</sup> Avenue Happy Valley, OR 97086 Phone - (503) 761-0220 Fax - (503) 761-7406

COMPANY NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

BILLING EMAIL: \_\_\_\_\_

CCB# \_\_\_\_\_ or License Plate of Vehicle Hauling Water \_\_\_\_\_

REQUESTED LOCATION: \_\_\_\_\_

WATER TO BE USED FOR: \_\_\_\_\_

DEPOSIT REQUIRED: \$1000.00

DEPOSIT TO BE REFUNDED AFTER FINAL PAYMENT OF USAGE CHARGES HAS BEEN RECEIVED, LESS ANY CHARGES FOR DAMAGES OR LOSS TO HYDRANT OR METER.

CONDITIONS OF USE

APPLICANT AGREES TO:

- 1) REPORT ALL EMERGENCIES IMMEDIATELY
- 2) ACCEPT ALL RESPONSIBILITY FOR DAMAGE OR LOSS TO AUTHORITY OR PRIVATE PROPERTY RESULTING FROM HYDRANT USE
- 3) REPORT ANY DAMAGES OR LOSS DISCOVERED BEFORE, DURING, OR AFTER USE OF AUTHORITY HYDRANTS OR METERS
- 4) OBTAIN WATER FROM ONLY THE HYDRANT DESIGNATED BY AUTHORITY
- 5) BE BILLED FOR WATER AT A RATE OF \$2.50 PER 1,000 GALLONS USED
- 6) BE BILLED A MONTHLY USE FEE OF \$100 STARTING 60 DAYS AFTER INSTALL
- 7) PROMPTLY PAY ALL CHARGES DUE TO THE AUTHORITY

SIGNED: \_\_\_\_\_ PRINT: \_\_\_\_\_  
(APPLICANT)

AUTHORITY USE ONLY:

PAYMENT DATE: \_\_\_\_\_ PAYMENT TYPE: CARD (LAST 4): \_\_\_\_\_

CHECK#: \_\_\_\_\_

INSTALL - METER#: \_\_\_\_\_ READING: \_\_\_\_\_ [00] DATE: \_\_\_\_\_

INSTALL LOCATION: \_\_\_\_\_

INSTALLED BY: \_\_\_\_\_

RETURN - READING: \_\_\_\_\_ [00] DATE: \_\_\_\_\_ Does meter have any damage Y/N: \_\_\_\_\_