

## **Hydrant Use Permit**

## **CONDITIONS OF USE:**

- 1. The City will supply and install a backflow prevention assembly and/or meter with valves opened by the City. Independent hydrant port **NOT** to be used by the Permit Holder. Hydrant not to be turned on or off by Permit Holder.
- 2. Valid for use Monday to Friday between the hours of 7:30am and 3:00pm.
- 3. For usage outside of the above specified hours an overtime rate will apply.
- 4. If you wish to cancel this permit please provide 24 hours notice and call 604-469-4574 or email operations@portmoody.ca otherwise charges will apply.
- 5. Refundable deposit of 777.43 is required per hydrant.
- 6. Back flow assembly fee \$152.20 and a refundable deposit of \$517.90 per unit.
- 7. Upon return of backflow assembly, and upon the completion of our tear down/inspection, your deposit will be refunded.
- 8. \$271.33 Hydrant Inspection Fee Applies.
- 9. Water Use Fee Applies of current meter rate or flat rate of \$100 for 1<sup>st</sup> day and \$50 for each additional day, whichever is greater.
- 10. The holder of this permit is responsible for all damage to equipment and property that may occur and indemnified the City against any and all claims associated with the use of the hydrant(s). The holder is cautioned that the City water supply is chlorinated and discharge of water must be controlled and treated so as not be detrimental to the natural environment.
- 11. This permit is good for the dates and locations stated only, are not transferable and is subject to cancellation without notice. The hydrant will be available for use within 48 hours of issuance of this permit.
- 12. Should an on-site appointment be required with City staff, the holder of this permit is responsible for arriving at the agreed upon time. Failing to do so will lead to a penalty and deduction of the deposit

I hereby agree to all the terms of the Highway and Water Bylaws as they pertain to this permit and guarantee the fulfillment of terms set out therein within the time specified in this permit.

DATE:

## APPLICANT'S SIGNATURE

APPROVED BY

Utility Maintenance Supervisor
Superintendent
Operations Assistant

EMAIL TO:Image: operations@portmoody.caFAX TO:Image: operations@portmoody.caFAX TO:Image: operations@portmoody.ca

MC Work Order #