

City of Dayton Water Department
 320 W Monument Ave.
 Dayton, Ohio 45402
 937-333-3725



CITY OF DAYTON FIRE HYDRANT METER USE PERMIT

Applicant _____ **Address** _____

City _____ **State** _____ **Zip Code** _____

Contact Person _____ **Local Phone Number** _____

Hydrant Location _____ **Proposed Use** _____

Estimated Period of Use: From: _____ **To:** _____

Minimum use 7 days - Maximum use 12 months – All meters are to be turned in by Dec. 1 each year

Meter Size	City Use	Meter Fees		*Deposit includes a required \$100.00 fire hydrant wrench deposit.
		County Use	Deposit*	
5/8"	\$5.00	\$5.50	\$200.00	
3"	\$80.00	\$88.00	\$600.00	

Applicant must have a permit from Montgomery County before a meter will be issued for a County hydrant.

Total Amount Due \$ _____

Declaration by Applicant:

I/we, _____, will take full responsibility in seeing that only the City of Dayton fire hydrant wrench provided is used during any operation of said hydrant. I/we also understand that I/we will be billed actual cost for any damage imparted, repairs or replacement needed to the fire hydrant, or meter, as result of my/our use. I/we understand the inherent danger of using fire hydrants, and I/we shall indemnify and save harmless the City of Dayton from all claims or damages resulting from the use of said hydrant. The meter will be made available for reading every month. Failure to do so may result in the termination of hydrant use. I/we also understand that the City of Dayton can request return of the meter and wrench at anytime, failure to do so may result in the restriction of future use, possible fines, and or forfeit of deposit. **A list of any additional hydrants used must be provided to Water Engineering before use. A fine of \$100.00 may be assessed if Water Engineering is not notified of a location change.**

Applicant: _____ Date: _____
 (Applicant's signature)

NOTE: Call hydrant repair supervisor at 333-4909 if fire hydrant is damaged prior to use. Deposits will be returned after the meter and wrench have been returned, it has been determined that no damage was done to the fire hydrant, and the final bill payment has been received.

Meter Make _____	# _____	Set Read _____	Date _____
Return Read _____		Date _____	
This is Your Receipt - Retain for Your Records			
<input type="checkbox"/> Cash	<input type="checkbox"/> Check	Receipt Number _____	
Received By _____		Date _____	
(This signature indicates permit approval)			

If you experience problems with operating the Fire Hydrant, call 333-4909 or 333-4905.
 cc: customer, accounting, file (original), cra