



CITY OF PORT ALBERNI

4835 ARGYLE STREET, UPPER FLOOR, PORT ALBERNI, BC, V9Y 1V9 (250) 720-2830

PERMIT TO USE CITY FIRE HYDRANTS

This permit authorizes: _____ Email: _____

Address: _____ Phone: _____

to operate and use water from City of Port Alberni Fire Hydrants for the purpose of: _____

Description of Fire Hydrant Location	Hydrant Number	Number of Days Connected

Additional Equipment Borrowed	Date Borrowed	Date Returned	Waterworks Operator

*** HYDRANTS TO BE OPERATED ONLY BY THE INDIVIDUAL HOLDING THE PERMIT AND IN ACCORDANCE WITH INSTRUCTIONS FROM THE CITY WATERWORKS DEPARTMENT.**

Instruction given by: _____ Date: _____
Waterworks Operator

Hydrant Fee	\$	\$150 per hydrant
Usage Fee (non-refundable)	\$	\$50.00 per week or portion thereof
Equipment Use (non-refundable)	\$	\$50.00 (City supplied backflow assembly)
Total		

Permit Issued the _____ day of _____, 20__

Permit expires the _____ day of _____, 20__

I agree to comply with the terms and conditions of this permit.

Signature of Applicant

Permit Issued by: _____

Permit Issuer

*** ANY DAMAGE TO CITY EQUIPMENT WILL BE BILLED TO THE PERMIT HOLDER.**

*** OWNER-SUPPLIED BACKFLOW ASSEMBLY MUST HAVE BEEN TESTED IN THE LAST YEAR.**

THIS PERMIT IS NOT TRANSFERABLE