

HOLLISTON WATER DEPARTMENT

703 Washington St – Holliston, MA. 01746 – PHONE: 508.429.0603 – FAX: 508.429.0642

Unauthorized use of a hydrant is a Three Hundred-Dollar (\$300.00) Fine

Hydrant Use Application

Date: _____

(One form per hydrant / non-transferable)
MONDAY thru FRIDAY ONLY

Permit #. _____

Applicant/Company Name: _____

Billing Address: _____

Contact Person: _____ Contact Phone #: _____

Hydrant Location: _____ Hydrant Use Date(s): _____

Anticipated Water Use (Gallons): _____ Purpose of Hydrant Use: _____

Terms and Conditions:

1. It is understood that applicant will be responsible for any damage to the hydrant, loss, and theft of the equipment including repair or replacement costs.
2. Never separate the connected cross-connection device from the meter or disassemble any part of the metering device.
3. Water from a fire hydrant is NOT intended for human consumption.
4. TOWN will turn the hydrant on and off.
5. APPLICANT will regulate needed flow by the valves on the device set.
6. Always open and close the valves **SLOWLY and COMPLETELY.**
7. All water drawn from the fire hydrant shall pass through the issued metering assembly.
8. A copy of this Permit must be kept in the vehicle and must be presented upon request to department personnel.
9. It is the responsibility of the applicant to notify the Water Department when finished using the hydrant meter.
10. The User shall lock the hydrant connection whenever the hydrant is not in use, or not being monitored by the User.
11. **NO** hydrant will be used between November 1 and April 1
12. The fee is \$5.00 per day plus water consumption @ **0.018** per gallon.

This permit is for the date(s), specific hydrant and purpose applied for. Uses outside the bounds of this permit are subject to fines.

By signing below, you accept the terms and conditions for the permitted use of this hydrant as well as all charges for services provided by the Holliston Water Department.

The Holliston Water Department will install a meter on the hydrant located above

Applicant Signature: _____ Date: _____

For Staff Use Only:

Approved by: _____ Date: _____

Meter No. _____ Size: _____ Make: _____

Meter Reading Start: _____ End: _____ Total Use: _____

Days of use _____ @ \$5.00 per day \$ _____

Water consumption @ \$ _____ per gallon \$ _____

Repairs/Replacement \$ _____

Administrative fee \$ _____

Total charges due \$ _____