



Fire Hydrant Usage Application

115 South Main Street · P.O. Box 389 · Webberville, MI 48892 · Ph: 517-521-3984 · Fax: 517-521-3165

Company Information:

Name: _____ Field Contact Name: _____

Address: _____ Field Contact Phone: _____

_____ Date of Pickup: _____

Phone: _____ Expected Date of Return: _____

Fax: _____ Email: _____

Meter Read at time of Pickup: _____

Meter Read at time of Return: _____

Hydrant to be used (location): _____

Fees will be assessed per thousand gallons; if you use less than 1,000 you will pay the minimum fee of \$12.00. It is \$12.00/1,000.

I, the undersigned understand that this fee must be paid and the Village will hold them responsible for any damages.

Authorized Signer

Date

OFFICE USE:

DPW Approval: _____

Fee Received by: _____