



# PLAINFIELD CHARTER TOWNSHIP WATER DEPARTMENT ANNUAL HYDRANT PERMIT

YOU MUST NOTIFY THE WATER DEPARTMENT AT 616-363-9660 EACH DAY A HYDRANT IS USED.

**CONNECTION SIZE IS 2 1/2" NATIONAL STANDARD ONLY!**

**APPLICANT INFORMATION:**

COMPANY _____	NAME _____
ADDRESS _____	CITY/STATE _____ ZIP _____
OFFICE PHONE _____	CELL PHONE _____

**PERMIT INFORMATION:**

ISSUE DATE: _____	RETURNED DATE: _____
BEGINNING READ: _____	FINAL READ: _____
TOTAL GALLONS USED: _____	

**CHARGES & FEES INFORMATION:**

BASE FEE <input type="checkbox"/>	\$200.00	NON-REFUNDABLE FEE
COMMODITY CHARGE	\$5.00/1,000 GAL	\$5.00 PER 1,000 GALLONS OF WATER USED WILL BE APPLIED AT FINAL BILLING.

**EQUIPMENT RENTAL INFORMATION:**

DEPOSIT <input type="checkbox"/>	\$1,000.00	REFUNDABLE DEPOSIT REQUIRED WHEN RENTING A TOWNSHIP OWNED METER ASSEMBLY.
RENT <input type="checkbox"/>	\$150.00/MTH	\$150.00 PER MONTH RENTAL FEE WILL BE APPLIED AFTER THE FIRST 30 DAYS.
OWN <input type="checkbox"/>	\$0.00	WHEN USING OWN METER PROOF OF CURRENT TESTING/CALIBRATION MUST BE ATTACHED.

It is understood that the above applicant has read and understood the attached, *Fire Hydrant Use Regulations*, and the *Instruction for Operating fire Hydrants* forms supplied by Plainfield Charter Township Water Department. Upon receipt of Township equipment in satisfactory condition, Plainfield Township's accounting department will return the deposit, less water used and any damage to equipment.

**DO NOT LEAVE HYDRANT METERS UNATTENDED DURING OPERATION OR ATTACHED TO HYDRANTS OVERNIGHT.  
FOR USE IN PLAINFIELD TOWNSHIP ONLY - YOU WILL BE CHARGED FOR ALL WATER RUN THRU METER!!!**

\_\_\_\_\_  
SIGNATURE DATE

**OFFICE USE:**

BASE FEE & DEPOSIT(IF APPLICABLE) TOTAL: \_\_\_\_\_ DATE: \_\_\_\_\_

PAID BY: CHECK# \_\_\_\_\_ CASH \_\_\_\_\_ INITIAL: \_\_\_\_\_

<input type="text"/>	GALLONS X \$5 =	<input type="text"/>			
	RENTAL FEES	<input type="text"/>	FROM _____	TO _____	
	DAMAGES	<input type="text"/>	*ATTACH DAMAGE REPORT FORM		
	LESS DEPOSIT	<input type="text"/>			
	<b>TOTAL</b>	<input type="text"/>	REFUND	OWE	

COMPLETED BY: \_\_\_\_\_ DATE: \_\_\_\_\_