

## District of Ucluelet Hydrant Application

Owners Name:
Service Address:
Legal Address:
Billing Address:
Phone Number:
Secondary Phone:

Contractor Name:				
Phone Number:				

## **Type of Service**

Single Family	Manufacture Home- private lot	Commercial
Duplex	Duplex Hotel/Motel	
Townhouse/Condo	Office/General	Other
Multi Family 3 & 4 Units	Restaurant	
Multi Family 4+ Units	Institution	

## **Service Size**

3⁄4″	1 1/2 "	3″	6″
1″	2″	4″	Other

## **District Hydrant Usage**

Location of Hydrant if Known:
Dates Required:
Number of Days Required:
Initial Fee:
Fee Per Day:
Total Usage (cubic meters)
TOTAL FEES

I understand that water service will be furnished and used in accordance with the rules, regulations and bylaws of the District of Ucluelet. I further understand that the District does not in any manner guarantee continuous delivery of water on demand nor does it assume any responsibility for damages which may occur due to a interruption of water delivery or change in pressure.

Signed by Owner: \_\_\_\_\_

Date \_\_\_\_\_

(print name)

District Inspector Approval of Water Meter Installation (for office use only)							
Building Permit Number : 2013-01	Inspection Date:						
Meter operational: Yes No							
Meter reading at inspection							
Inspected by:							