

445 Glenmore Road Kelowna BC V1V 1Z6 P. 250-763-6506 | F. 250-763-5688 www.geid.org

Hydrant Permit

Business Name:	Contact Name:
Contact Number:	Email:
Reason for Use:	
Location of Hydrant:	Hydrant Number:
Dates of permitted use:	to
Incl. Weekends: Not Incl. Weekends:	☐ Private ☐ Public ☐
Extension 1: Dates & Management's Signature	Extension 2: Dates & Management's Signature
Extension 3: Dates & Management's Signature	Extension 4: Dates & Management's Signature
Please Note: Hydrant meter carts will be automatically retrieved on the approved by GEID management <u>before</u> the date of expiry. I have read, understand and agree with the above regulations and the in Applicant's signature	nsite or offsite liability or inconvenience relating to the specified Fire Hydrant Permit expiration date of the Hydrant Permit. Unless an extension has been requested and indemnity clause: Management's signature (GEID)
OFFICE USE ONLY: Days of usage: x \$25 per day = \$	
Metered usage: $m^3 \times \$0.694/m^3 = \$$	Total \$
Unmetered usage: x \$25 per day = \$	Total \$
Beginning meter read:	End meter read:
Assigned meter cart number:	Invoice number:
Current year certificate of insurance submitted to GEID Backflow Preventer (must provide current certified certificate of Fire Hydrant Checks Completed Yes No Notes:	Yes
Permit Closed and Authorized by GEID Management for Final Billir	ng·