

LAKEHURST WATER AND SANITATION DISTRICT

7995 West Quincy Avenue

Littleton, Colorado 80123

Phone: 303-985-7895

Fax: 303-988-7291

**FIRE HYDRANT METER USE PERMIT**

Lakehurst Water and Sanitation District requires a \$2,000.00 deposit on the loan of a meter and appurtenances which also includes the use of the fire hydrant. This deposit will be returned to you in full when the meter and appurtenances are returned and found in good condition and working order. If the meter or appurtenances, including hydrant are broken, lost or not returned, the \$2,000.00 will be applied toward the cost of repairing or replacing, as appropriate, the equipment and you will be billed for the balance.

A service charge will be assessed per month of \$50.00 for each three inch meter. Water will be billed at the Fire Hydrant Meter Use Rate as the same now exists or may hereafter be amended from time to time. The current rate is \$8.10 per thousand gallons.

Use of the fire hydrant meter shall be in accordance with Lakehurst Water and Sanitation Rules and Regulations policy and operating procedures as amended from time to time. The applicant shall be responsible for any and all damage to the fire hydrant as a result of Applicants use.

Further, Permittee agrees to indemnify and hold harmless the District, its officers and employees, from any and all claims, costs and expense, including court cost and reasonable attorney's fee that arise out of or that are in any way connected with the Permittee's use of the Districts' fire hydrants and fire hydrant meter.

**\*Remember to only use the proper hydrant wrench and flush hydrant before attaching meter.\***

**\*All connections to fire hydrants must have an approved back-flow prevention device acceptable to the District.\***

**LOCATION OF HYDRANT:** \_\_\_\_\_

**PROJECT:** \_\_\_\_\_

**BILL TO:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ **DEPOSIT** \_\_\_\_\_

**CONTACT PERSON (please print)** \_\_\_\_\_ **Phone** \_\_\_\_\_

Applicant Signature

Lakehurst Representative

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METER SERIAL NO: \_\_\_\_\_

PICK UP DATE \_\_\_\_\_ BEGINNING MTR READ \_\_\_\_\_

RETURN DATE \_\_\_\_\_ ENDING MTR READ \_\_\_\_\_

PRE HYDRANT INSPECTION \_\_\_\_\_ POST HYDRANT INSPECTION \_\_\_\_\_

PRE METER INSPECTION \_\_\_\_\_ POST METER INSPECTION \_\_\_\_\_