



**Town of Oak Island  
Public Utilities Department  
Fire Hydrant Use Permit**

REQUEST DATE

WORK REQUESTED DATE

Requesting Company Name: \_\_\_\_\_

Requesting Company Representative: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing/Billing Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Hydrant Location(s): \_\_\_\_\_

Hydrant(s) #: \_\_\_\_\_

Nature of Job (Construction, Landscaping, etc.): \_\_\_\_\_

**PLEASE HAVE PERMIT AVAILABLE FOR TOWN EMPLOYEE INSPECTION**

- It shall be unlawful for any person, firm, contractor or corporation to open any fire hydrant without a hydrant permit. Violators shall be subject to a fine amount not to exceed \$500.00
- Permit is valid for 5 working days. CONTRACTOR MUST PROVIDE RPZ BACKFLOW.
- To the fullest extent permitted by law, the permittee shall indemnify, and hold harmless the Town and their agents and employees, from and against all claims, damages, and liabilities arising or resulting in whole or in part, from the performance of work pursuant to this permit.
- I have read the above application and know the contents thereof; the same is true and correct. I further agree that the above work will be done in accordance with all Federal, State and Municipal laws ordinances and policies.

Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

For Office Use Only

Date Issued _____	<u>Inspection</u>	
Meter Size _____	Backflow Prevention _____	Inspected by _____
Meter # _____	Gate Valve for Hydrant _____	Date Inspected _____
Start Read _____	Gate Valve for Tanker _____	Comments: _____
Final Read _____	Meter Installed correctly _____	_____
Return Date _____	Reg. Hydrant Wrench _____	_____