CITY OF CANANDAIGUA
APPLICATION FOR TEMPORARY HYDRANT USE

with meter and Backflow Prevention Device

(no meters will be provided from November 1st to April 1st)

Department of Public Works, Hurley Building
205 Saltonstall Street, Canandaigua, New York 14424
585-396-5060 Fax: 585-396-5002

Company/Applicant Name: _____

Address: _____ **Phone:** _____

Hydrant Location: _____

Dates required: From: _____ **to:** _____ Estimated Usage: _____GPD

Applicant's Signature: _____ Date: _____

Received By: _____ Date: _____

TEMPORARY HYDRANT SUPPLY BILL	DEPOSIT	ACTUAL
Equipment Fee: *Set Up & Removal of Device*	Charge $100.00	Charge:
Days Used @ $2/day	_____days	Charge:
Water usage $10.00/1000 gallons	_____gallons	Charge:
Equipment Damage:		
Meter No:		
Damage:		
RPZ No:		Subtotal Charges:
Lost or Damage:		Damage Charge:
Deposit will be refunded upon removal of equipment, minus charges for water used & set-up/removal charges.	Deposit: $5000.00	
	TOTAL:	**TOTAL INVOICE:**
Beginning Read:		
Ending Read:		
Beginning Read:		
Ending Read:		

Amount Paid $ _____ **Date Received:** _____ **By:** _____ **Check #** _____ **Cash $** _____