

CIP / CITY PROJECT HYDRANT USE REQUEST

This section to be completed by contractor requesting a hydrant permit:

Type of Project:

Water:

Location of Project (check one only):

Sewer:

City of Columbus:

Other:

Columbus Contract Area/Municipality:

Description of other:

Name of Contract Area / Municipality:

Name of Company / Contractor:

Name of Company / Contractor Contact:

Contact Phone:

Contact Email:

Project Name:

CIP / Project Number:

Hydrant(s) Requested:
(Hydrants can be identified
by a street address, the
closest intersection, or the
hydrant ID number)

Date(s) of Hydrant Usage:

Purpose of Usage:

Signature of Applicant (typed signature acceptable)

Date

This section to be completed by City of Columbus or Municipality Project Manager:

Project Manager's Name:
(Columbus or Municipality)

Project Manager's Email:

Project Manger's Phone:

Project Manager's Signature:
(electronic signature required)

Date: