

## **Community Development Fire Hydrant Application**

Location	Choose approved location	Related Columbus Hydrant #
	$\Box$ 1 <sup>st</sup> hydrant west of St. Rt. 605 on New Albany Road East	(# 10649B02)
	□ 1 <sup>st</sup> hydrant west of Beech Road on Smith's Mill Road South side	(# 0759J05)
	□ 2 <sup>nd</sup> hydrant west of US 62 on Village Hall Road West	(# 0463B05)
	□ 1 <sup>st</sup> hydrant west of Lambton Park Road on Lambton Green	(# 0381J09)
Submittal Information	Purpose of the Permit	
	Duration of the Permit Starting Date	Ending Date
	Number of Days x 25.00 / day	Total Fee Due
	<ul> <li>Fire hydrants may only be used Monday through Friday 8:3 not be used on the following holidays: New Years Day, Me Day, Thanksgiving Day and Christmas Day.</li> <li>The applicant shall be responsible for any damage that may and other appurtenances as a result of the applicant's neglig</li> <li>Someone shall remain at the hydrant from the time of conne shall be removed from the hydrant when not in use.</li> <li>Applicant shall abide by all regulations and guidelines of the Rules and Regulations. This permit shall be submitted to the to obtain a Columbus Fire Hydrant Permit.</li> <li>Use of approved backflow device and fire hydrant wrench.</li> <li>Pump level shall be 5 feet below pumper nozzle per New A</li> <li>The City of New Albany and the City of Columbus permits at all times when the hydrant is in use. If both permits are n hydrant will be in violation of the applicable ordinances.</li> <li>Each permit shall apply to only one (1) hydrant, purpose an The use of any other hydrant or purpose by the permit hold hydrant.</li> </ul>	emorial Day, Independence Day, Labor occur to the fire hydrant, water mains gence. ection until the removal. All fittings the City of Columbus Division of Water e City of Columbus Division of Water libany requirements. must be in possession of the applicant ot available the operation of the d time period as stated on the permit.
Applicant	Contractor Name Phon	e
	Contractor Address	
	Contact Name	Phone
	Contact Email	
Signature	I hereby certify that I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the city's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.	
	Applicant Signature	Date

Department Address: 7815 Walton Parkway • New Albany, Ohio 43054 • Phone 614.939.2254