PERMIT # _____

CITY OF RUTLAND
DEPARTMENT OF PUBLIC WORKS

APPLICATION FOR HYDRANT FLOW TEST

Location of Flow Test:_____

Applicant: _____ Date: _____

Address: _____ Phone: _____

_____

Date Requested for Flow Test:_____

Conditions:

1. Applicant to coordinate date and time of flow test with Water Department at least one week prior to test.
2. While every effort will be made to honor our commitments, applicant is advised that any scheduled flow test may be postponed or cancelled by DPW without notice in the event of an emergency or other unforeseen event affecting the Water Department.
3. Water Department personnel will perform the test, record results and provide copy of results to applicant.
4. Operation of hydrants is to be by DPW personnel only.
5. Applicant or applicant's agent is encouraged to witness the test.
6. Hydrant flow tests shall be allowed only in the spring (April 1 through June 30) and fall (October 1 through November 30) unless otherwise specifically approved by the Commissioner of Public Works.

Permit Fee: $ 50.00 per hydrant flowed x _____ hydrants = $ _____

_____
Signature of Applicant

_____ __/__/__
Approved (Commissioner of Public Works)

Return to: *by mail:* Rutland City DPW
P.O. Box 969
Rutland, VT 05702

office location: City Hall
52 Washington Street
Rutland, VT 05701

Phone: 802-773-1813
Fax: 802-775-3947

Fee Paid:
Check No. _____ or Cash ___

Code: 8000

Rev 10-2-2008