

FIRE HYDRANT PERMIT APPLICATION

OBERLIN FIRE DEPARTMENT

FIRE PREVENTION BUREAU

430 S. Main, Oberlin OH 44074

PERMIT # _____

Initial application

Renewal

Amended

BUSINESS or APPLICANT NAME: _____

MAILING ADDRESS: _____

Number/Street

Space/Suite

City

State

Zip

BUSINESS PHONE# (____) _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE NUMBER: DAYTIME: (____) _____ AFTER HOURS: (____) _____

APPLICATION IS HEREBY MADE TO USE A FIRE HYDRANT FOR THE FOLLOWING REASON: Provide description & details.

DATE(S): FROM: _____ TO: _____

HYDRANT LOCATION: _____

Number/Street

Building Designation

Hydrant Permit Fee: \$25 payable to the City Of Oberlin

Payment Rec'd \$ _____ Receipt # _____

I hereby certify that I have read and examined this application and know that the information contained herein is true and correct. I also certify that I am the owner (or owners authorized agent) of this property and that all work shall be performed in accordance with all state and local laws regulating the project proposed by this application. I understand that failure to comply with such laws or the submission of inaccurate information may result in the revocation of any permit from this application.

OWNER/AGENT SIGNATURE: _____ DATE: _____

OWNER/AGENT PRINTED: _____ DATE: _____

CONTACT NAME (If different than above): _____ PHONE: _____