

CONTACT: _____
PHONE #: _____

COPY



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CITY OF COLUMBIA
SOUTH CAROLINA

UTILITIES & ENGINEERING DEPARTMENT /

/ PO BOX 147 / COLUMBIA, SC 29217 / (803) 545-3400

FIRE HYDRANT PERMIT

PERMIT FEE: _____ CASH CHARGE CHECK DATE: _____

NAME: _____ ADDRESS: _____

HYDRANT #: _____ LOCATION: _____

DATE(S) HYDRANT TO BE USED: _____

APPLICANT ASSUMES ALL PUBLIC LIABILITY AND DAMAGES TO HYDRANT.

THIS PERMIT SHALL BE IN THE POSSESSION OF PERSON USING HYDRANT

COPY

SIGNED: _____ SIGNED: _____

Utilities & Engineering Department