



6100 219<sup>th</sup> Street SW, Suite 200  
 Mountlake Terrace, WA 98043  
 Phone 425.744.6267 Fax 425.775.0420  
[PermitSpecialist@ci.mlt.wa.us](mailto:PermitSpecialist@ci.mlt.wa.us)  
[www.cityofmlt.com](http://www.cityofmlt.com)

# HYDRANT USE APPLICATION

Permit # \_\_\_\_\_

Job Site Address \_\_\_\_\_

Description of Work \_\_\_\_\_

## CONTACT INFORMATION

<u>APPLICANT</u>	
Name	_____
Address	_____
City	_____ State _____ Zip _____
Ph	_____ Fax _____
E-mail	_____
Contact Name	_____
Ph	_____ Fax _____
E-mail	_____

<u>CONTRACTOR</u>	
Name	_____
Address	_____
City	_____ State _____ Zip _____
Ph	_____ Fax _____
E-mail	_____
State Lic. #	_____
City Lic. #	_____

\_\_\_\_ Applicant will pick up assembly at Public Works, 6204 215<sup>th</sup> Street SW

\_\_\_\_ Applicant requests delivery by Public Works (Preferred City Option)

DESIRED USE FOR: \_\_\_\_\_

DATE(S) OF USE: \_\_\_\_\_

TIME OF DAY: \_\_\_\_\_

APPROXIMATE GALLONS: \_\_\_\_\_

OR 100 CUBIC FEET: \_\_\_\_\_

APPLICANT CONTACT PERSON \_\_\_\_\_

PHONE: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY

STATE

ZIP CODE

**I certify to the best of my knowledge, the information provided on this application is true and correct.**

Sign Applicant \_\_\_\_\_ Date \_\_\_\_\_

Print Applicant \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE USE ONLY

Received By \_\_\_\_\_ Date \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_ Date \_\_\_\_\_ Receipt Number \_\_\_\_\_

**CITY OF MOUNTLAKE TERRACE**  
**Hydrant Use Requirements**

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1. All water use must flow through a double check valve assembly (D.C.V.A) or an air gap, and be metered.
  - If an air gap is not used, the applicant must use a City provided a double check valve assembly or the applicant must provide one.
  - The applicant must also use a City provided water meter.
2. All applicant provided hoses, valves, and air gaps must be approved by the City of Mountlake Terrace Water Division at the time of application.

\_\_\_\_\_ If applicant is providing the double check valve assembly, provide test documentation showing that the device has been tested by a state qualified tester within the last 12 months.

3. The City owned double check valves and meters are provided to the applicant following payment of deposits and fees. The deposits and fees are listed below and on the application.
4. The City has a limited number of double check valve and meter assemblies available for applicant use. A three working day notice from the applicant is needed for the City to provide a D.C.V.A and/or a water meter.

\_\_\_\_\_ Check with Permit Specialist in Building 425.744.6267 or Fabian Hackett at Public Works 425.670.8264 x 103 for double check valve availability.

5. COST OF WATER: \$5 per day water use fee based on the number of calendar days of possession of check valve and meter, or the metered consumption at current rates, whichever is greater.
6. The damage deposits for a D.C.V.A. and a meter are refundable upon return of the equipment in the same condition as when it was issued. If repairs are required or parts are missing, the cost of the repairs and missing parts will be deducted from the deposit.
7. For a full refund of the unused portion of the water use deposit, the total number of days of use must be delivered to the City in writing along with all City equipment.
8. Application is good for 180 days and must be renewed every 180 days after for an additional fee of \$50.
9. Water shall be obtained only from hydrants designated on the map attached to the permit. Hydrant operation shall be with an applicant supplied hydrant wrenches only (no crescent or pipe wrenches). Only City personnel are authorized to operate water main or hydrant foot valves.
10. The City may limit the use of water from hydrants based on system capacity or during an emergency.

**REMOVE FROM THE HYDRANT THE METER/DOUBLE CHECK VALVE ASSEMBLY DURING NON-WORKING HOURS.**

**Failure to comply with the criteria set forth in this application will result in a fine of not less than \$500.**

**CITY OF MOUNTLAKE TERRACE  
Hydrant Use Requirements  
TANKER TRUCKS & TRAILERS**

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1. Tanker trucks and trailers to be filled from a Mountlake Terrace fire hydrant require a cross-connection inspection in accordance with the City of Mountlake Terrace Cross-Connection Program (MTMC 13.45).
2. Tanker trucks and trailers will be assessed the same risk as an unapproved auxiliary supply, a high health hazard.
3. Air Gap or Double Check Valve Assembly is the required protection for all tanker trucks and trailers (unless approved by the City of Mountlake Terrace).
4. All water use must be metered.
5. The City of Mountlake Terrace will record inspection information for the annual summary report which includes:
  - a. Name of company\_\_\_\_\_
  - b. Driver's name\_\_\_\_\_
  - c. License plate number\_\_\_\_\_
  - d. Billing address\_\_\_\_\_
  - e. Location of backflow protection on the vehicle\_\_\_\_\_
  - f. Date of inspection\_\_\_\_\_
6. MLT CCS EMP #\_\_\_\_\_

**TO BE COMPLETED BY THE CITY**

DCVA SERIAL # _____	DCVA MAKE _____
METER SERIAL # _____	METER MAKE _____
INITIAL METER READING _____	MLT EMP. # _____
HYDRANT GATE VALVE    YES    NO	DATE CHECKED OUT _____
2.5" X 5' FIRE HOSE        YES    NO	

**RETURN AND INSPECTION OF DEVICE**

APPLICANT: \_\_\_\_\_ PERMIT # \_\_\_\_\_

JOB USE LOCATION: \_\_\_\_\_

DCVA SERIAL # \_\_\_\_\_ DEPOSIT AMOUNT: \_\_\_\_\_

METER SERIAL # \_\_\_\_\_ FINAL METER READING: \_\_\_\_\_

HYDRANT GATE VALVE: YES NO HOSE: YES NO

SIGNATURE: \_\_\_\_\_ DATE RETURNED: \_\_\_\_\_

CONDITION OF DEVICES RETURNED: \_\_\_\_\_

REPAIRS NEEDED: YES \_\_\_\_\_ NO: \_\_\_\_\_

MLT EMP # \_\_\_\_\_

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TOTAL DEPOSIT RETURNED: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_