RAINBOW
MUNICIPAL WATER DISTRICT

Fire Hydrant Application

Name: _____ Phone: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Site Address: _____ APN: _____

City: _____ State: _____ Zip Code: _____

Contractor: _____ License No: _____ Exp Date: _____

Project Administration Deposit: $4,000 **Plan Review Deposit:** $1,400 per sheet

I hereby request Rainbow Municipal Water District (District) approve the installation of a fire hydrant to the above service address with the understanding that all costs for plan checks, installation, materials, appurtenances, and inspection shall be paid by Owner (Owner is defined as the legal owner of the parcel(s) and can provide proof of ownership). Prior to starting work, Owner shall comply with the following requirements:

1. Provide an electronic or paper copy of the proposed plans to be reviewed by District staff.
2. Obtain District's written approval of the proposed plans via the plan review process.
3. Obtain written approval from the local fire authority.
4. Obtain an Encroachment Permit for work completed within a District Easement, If applicable.
5. Approval of this application is contingent upon payment in full of plan review and project administration deposits, encroachment fees (if applicable).

The Owner shall hire a Contractor with a class "A" license to install the fire hydrant in accordance with the District's Standards and Specifications, must meet the District's insurance requirements and provide construction submittals. Once the project has been accepted by the District's Board of Directors, the Owner warrants the work to be free of defects for 12-months from the date of acceptance. The District will become responsible for the daily operation and maintenance of the fire hydrant after acceptance. The remaining balance of the plan review and project administration deposits (if funds remain) will be returned to the Owner following the 12-month warranty phase provided there are no issues or defects.

Signature: _____ Date: _____
Property Owner

Valve Type: _____ Valve No: _____

Longitude: _____ (DD) Latitude: _____ (DD)

Fire Hydrant: Type _____ Manufacturer _____

Lateral: Size _____ Length _____ Material _____

Type of Main: _____ Depth of Main: _____

Fire Department Notified: ☐ Yes ☐ No Valve Maint Notified: ☐ Yes ☐ No
(NCF Email: kmahr@ncfire.org and cswanger@ncfire.org)

Signature: _____ Date: _____
Engineering Inspector