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The City of Traverse City

Office of the Clerk

GOVERNMENTAL CENTER  
400 Boardman Avenue  
Traverse City, MI 49684  
(231) 922-4480  
tcclerk@ci.traverse-city.mi.us



Dear Applicant:

**Subject: Application for Use of a Hydrant Meter**

Enclosed is an Application for Use of a Hydrant Meter which must be completed in its entirety prior to drawing water from a water hydrant or other public connection. Please familiarize yourself and adhere to the Traverse City Code of Ordinances Chapter 1044 Section 1044.12 *Use of Hydrants* which can be viewed in its entirety at [www.traversecitymi.gov/downloads/1044.pdf](http://www.traversecitymi.gov/downloads/1044.pdf).

When submitting your application, please include the following:

- 1). Deposit (dependent on size of meter desired)

Please note that your \$40 permit fee and monthly water usage costs will be deducted from your deposit.

Once your application and required documents have been received, the City Treasurer's Department will obtain approvals from the appropriate departments and agencies. Once all departments have approved your request, the City Treasurer's Department will issue you a formal *Use of Hydrant Meter*.

We hope this information is helpful! The City of Traverse City looks forward to working with you to compliment the living experience in Traverse City! Should you have any questions, please feel free to contact anyone in the City Treasurer's Department at (231) 922-4431.

Most Sincerely,

A handwritten signature in blue ink, appearing to read "Benjamin C. Marentette".

Benjamin C. Marentette, CMC  
City Clerk

K:\tcclerk\permits\_licenses\Hydrant Meter Application\Cover Letter.doc  
12/18/13

CITY OF TRAVERSE CITY  
APPLICATION FOR USE OF HYDRANT METER



Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Person Responsible for Meter (please print full name):

\_\_\_\_\_  
(last) (first) (Middle)

Driver's License # \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_

Date of Birth \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Intended use of Hydrant Meter: \_\_\_\_\_

Location of Hydrant \_\_\_\_\_

Anticipated dates to be used \_\_\_\_\_

Size of Meter desired:

Size of Meter - 5/8 x 3/4"  
1"  
3"

Deposit: \$ 400.00 \_\_\_\_\_  
\$ 500.00 \_\_\_\_\_  
\$1900.00 \_\_\_\_\_

\$40 permit fee and monthly water usage cost (\$12 - \$96 month) will be deducted from deposit.  
Contractor will be responsible for all damages to the hydrant meter and the hydrant.  
RPZ=s will be tested monthly on site or arrangements may be made to have it tested elsewhere at the contractor=s expense, and copies will be furnished by the contractor to the Project Engineer and the Water Maintenance Department (507 Hannah, Traverse City, MI 49686, 231-922-2057 fax).

**The undersigned, declares and says he/she wishes to be permitted to perform the operation, service or act stated hereon and that the statements made above are true and correct to the best of his\her knowledge and belief. And further says that he/she will comply with all provisions of the ordinances of the city of Traverse City relative to the operation, service or act for which the certificate is requested. Further agrees to hold the city of Traverse City free and harmless from all liability which may be imposed upon it, to reimburse the city of Traverse City for all expenses of litigation in connection with the defense of claims as such liability and claims may arise because of negligence in the performance of the work or act for which the certificate was issued.**

**The applicant acknowledges that the City may be required from time to time to release records in its possession. The applicant hereby gives permission to the City to release any records or materials received by the City from the applicant as it may be requested to do so as permitted by the Freedom of Information Act, MCL 15.231 et seq.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Signature

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**PERMIT FOR USE OF HYDRANT METER**

Deposit Paid \$ \_\_\_\_\_ Permit No: \_\_\_\_\_ Issued to: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature City Treasurer's office

**CITY OF TRAVERSE CITY  
WATER DEPARTMENT HYDRANT METER USE**

Meter # \_\_\_\_\_ RPZ# \_\_\_\_\_ Date Tested \_\_\_\_\_

Checked out by \_\_\_\_\_ Checked in by \_\_\_\_\_

Date out \_\_\_\_\_ Reading \_\_\_\_\_

Date in \_\_\_\_\_ Reading \_\_\_\_\_

Meter Size:    5/8    1    3    RPZ    Valve    Wrench    ADTR    Quick Cplg

Condition \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
=====

**CITY OF TRAVERSE CITY  
UTILITY ACCOUNTING HYDRANT METER USE**

Company Name \_\_\_\_\_

Deposit Paid \$ \_\_\_\_\_ Date \_\_\_\_\_  
(101-000-285)

Less Water Usage \$ \_\_\_\_\_ Req. # \_\_\_\_\_  
and Damages (591-000-601)

Less Permit Fee                    - 40.00  
(591-000-650)

Refund Balance \$ \_\_\_\_\_ Initial \_\_\_\_\_