



Town of Lewiston Water Department
P.O. Box 109
Model City, NY 14107



Phone: 716-754-8214 • Fax: 716-754-9483

2025
TOWN OF LEWISTON HYDRANT USE PERMIT

NAME: _____

ADDRESS: _____

BILLING ADDRESS: _____

PHONE NUMBER: _____ DATE: _____

USE OF HYDRANT FOR OBTAINING WATER FOR SPRAYING OR IRRIGATION PURPOSES IS SUBJECT TO THE FOLLOWING REGULATIONS:

1. Hydrant meter will be used **ONLY IN** the Town of Lewiston.
2. No applications will be approved until previous bill is paid.
3. Town of Lewiston does not guarantee irrigation water to fire hydrants.
4. Renter will assume all responsibility for loss or damage to the hydrant, meter fittings and hydrant wrench, resulting from the use of the hydrant.
5. The minimum cross connection protection for an irrigation meter should be a double check valve with a guard valve installed after the check so that the flow of water is regulated by the guard valve and not by the operating nut of the hydrant.
6. An air gap must be provided when filling spray rigs. Hose must not be put directly into tank.
7. Pumps will not be allowed to connect directly to a fire hydrant. Connections to fire hydrants are only by a 2-1/2" opening. No streamer connections allowed. A pump would only be allowed in the irrigation system if it was connected by a minimum of 100 feet of 2-1/2" to 3" collapsible hose.
8. All meters and cross connection protection devices should be properly blocked so as not to put a strain on the fire hydrant.
9. Renter agrees to return meter to the water department at the end of each season. At that time billing will be sent to the renter.

***** ALL HYDRANT METERS MUST BE TURNED IN BY THE END OF OCTOBER *****

METER SIZE _____

READING AT START _____

READING AT FINISH _____

CONSUMPTION _____

METER NUMBER _____

DATE INSTALLED _____

DATE RETURNED _____

SIGNATURE OF APPLICANT _____

Security Deposit Amount: _____

Seasonal Fee Amount: _____

Amount Paid/Date: _____

Bill Amount/Paid Date: _____

Deposit Return Date: _____

HYDRANT WATER METERS

DEPOSIT REQUIRED Initial _____

1" Meters shall require a deposit of \$300.00

Deposit Date: _____

1 1/2" Meters shall require a deposit of \$1,100.00

Deposit Date: _____

2" Meters shall require a deposit of \$1,500.00

Deposit Date: _____

*All deposits must be made prior to this issuance of any hydrant meter. Deposits shall be returned at the end of the season after meters have been returned and inspected for damage.

CARRY OVER DEPOSIT FROM PREVIOUS YEAR Initial _____

Deposit amount carried over: _____

Date: _____

DAMAGE TO METER Initial _____

The cost for the repair of any damage the meter sustained during its seasonal use will be deducted from the deposit.

SEASONAL FEES Initial _____

There shall be a **\$200.00 (Two Hundred Dollar)** use fee for each hydrant meter issued (non-refundable). This fee must be paid prior to the issuance of the meter.

USE OF METER OUTSIDE OF TOWN OF LEWISTON Initial _____

If a meter is found to have been outside the Town of Lewiston there shall be a **\$250.00 (Two Hundred and Fifty Dollar)** surcharge. This surcharge will be deducted from deposit.

Street address or addresses of where the Meter will be used: (List ALL)

I, _____, have received a Hydrant Meter from the Town of Lewiston, I have checked to make sure the Meter ID on this form is the same as the meter I have received. I have also conducted a visual inspection of the Meter for any outward signs of damage. I understand that if this meter is used outside of the Town of Lewiston, I shall incur an additional surcharge.

I have read and do fully understand the above rules and regulations with regard to my receiving a Hydrant Meter from the Town of Lewiston.

Signature