

APPLICATION



Hydrant Permit

Please return completed form to:

✉ Central Highlands Water – Metering
PO Box 152
Ballarat, VIC, 3353

✉ meteringservices@chw.net.au

Applicant/Business Name: _____

Proposed use of Hydrant: _____

Length of Permit Required: 3 Months or Less Over 3 months

Areas of Use: Ballarat and District Ballan Beaufort Maryborough and District

Vehicle Registrations to be associated with permit:
(4 maximum)

Name of person completing application: _____

Phone Number: _____ Email Address: _____

Postal Address: _____

Customers requiring permit over 3 months must nominate a mobile number to receive SMS to return meter readings:

Nominated Mobile Number: _____

OFFICE USE ONLY

Date Received: _____

Filed Under Trim No: _____ Hydrant Number: CHW _____