

City of Fayetteville
Water and Sewer
Customer Service Division



210 Stonewall Avenue W, Fayetteville, GA 30214 | Phone (770) 460-4237 | Fax (770) 460-4238 | Email: utility@fayetteville-ga.gov

Hydrant Meter Permit Application

Date: _____

Business/Customer Name: _____

Business Contact or Representative: _____

Billing Address: _____

City: _____ State: _____ Zip code: _____

Business Phone: _____ Cell Phone: _____

Email: _____

Location of Hydrant to Be Used: _____

Specific Purpose of Use: _____

How Many Days Needed for: _____

Permit holder has read and agrees to the Hydrant Meter Policy and all terms and conditions of the permit. Violation of the Policy or any specified or implied condition constitutes grounds for immediate revocation of the permit and equipment. The permit holder agrees to relinquish the meter to the City of Fayetteville Water and Sewer Department at any time.

/s/

To be completed by the Utility Billing Manager – Do Not write under this line

Permit No: _____

Account Number: _____

Deposit Received: _____

Meter No. Issued: _____

Reading on Meter Issued: _____