

Hydrant standpipe licence application form

Please complete all sections of this form

Correspondence details

Company name _____

Address _____

_____ Postcode _____

Contact first name _____ Surname _____

Daytime telephone number _____

Mobile number _____

Email address _____

Finance details

Account contact name _____

Daytime telephone number _____

Email address _____

Standpipe details

What size of standpipe do you require? 20mm 40mm (**risk assessment required**)

What dates do you require the standpipe?

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 to

D	D	M	M	Y	Y
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What hose connector is required? 2½ inch instantaneous fire hose

Hose union bib tap

Will the standpipe be: Static Mobile

Purpose of use _____

Estimated daily volume of water _____ litres

Working times _____ • _____ am / pm to _____ • _____ am / pm

If static, proposed location _____

_____ Postcode _____

Who will use the standpipe

Full name _____

Contact number _____

Vehicle registration details (if mobile) _____

Please send your completed form to:

Standpipe Department, Cambridge Water, 90 Fulbourn Rd, Cambridge CB1 9JN

Or email: standpipes@south-staffs-water.co.uk

For office use only

Charges

Deposit

Admin charge inc VAT
(if applicable)

Hire charges
(if applicable)

Total received

Print name

Date

Credit card

Cheque

BACS

Account details

Account number

Invoice number

Standpipe details

Serial number

Meter reading out

Date