



**CITY OF NEWPORT
DEPARTMENT OF UTILITIES
WATER DIVISION
70 HALSEY STREET
NEWPORT, RI 02840**

Phone: 401-845-5600 Fax: 401-846-0947



Private Fire Service Application

**1-888-Dig Safe
www.digsafe.com**

Application Date: _____

Property Address: _____ Plat/Lot: _____

Newport Middletown Portsmouth

Owner's Name: _____ Phone: _____

Owner's Mailing Address: _____
(city, state, zip)

Contractor: _____ Phone: _____

Contractor's Address: _____
(city, state, zip)

New Service Service Renewal

Type of Service: Residential Commercial

Application Fee*: Residential (\$60) Commercial (\$100) Received by: _____

Main Tap Required? YES NO By Whom? _____

Fire Service Size (circle one): < 2" 4" 6" 8" 10" 12" Other: _____

***Fire Marshall Approval**

*Signature By: _____ *Signature By: _____
(Owner) (Contractor)

*Printed Name By: _____ *Printed Name By _____
(Printed Name - Owner) (Printed Name - Contractor)

*** Fire Marshall Approval, Site plan, Application Fees and signatures are required for application to be accepted.**

DO NOT WRITE BELOW THIS LINE

REGISTER # _____

COMMENTS:

_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Contact
Distribution Supervisor	Date		
_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Contact
Meter Supervisor	Date		
_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Contact
Deputy Director	Date		
_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Contact
Director	Date		

Private Fire Service Application Cont.

Site Plan (site plan must accompany application)