

**Wadesboro Fire Department  
Application for Hydrant Adoption**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**1<sup>st</sup> Hydrant Choice** \_\_\_\_\_

**2<sup>nd</sup> Hydrant Choice** \_\_\_\_\_

**Brief description of proposed design** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Hydrant Name** \_\_\_\_\_

Return to: Wadesboro Fire Chief  
PO Box 697  
Wadesboro, NC 28170

Phone: 704-694-2167

FAX: 704-694-3112

**Office Use Only**

Hydrant number: \_\_\_\_\_ Approved by: \_\_\_\_\_

Date Awarded: \_\_\_\_\_