



## FIRE FLOW FIELD TEST REQUEST

*Information to be completed by Applicant:*

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Governing Fire District: \_\_\_\_\_

Flow test location: \_\_\_\_\_

Reason for test: \_\_\_\_\_

Flow required in gpm at 20 psi residual pressure: \_\_\_\_\_

**The minimum test fee of \$50.00 must accompany this request. If the time required to complete the test exceeds 2 hours, you will be billed for the excess at a rate of \$50.00 per hour.**

### ***For office use only:***

Fee Paid? \_\_\_\_\_ Engineer approval to schedule: \_\_\_\_\_

Map number: \_\_\_\_\_ Date of test: \_\_\_\_\_

Time: \_\_\_\_\_ Location to meet: \_\_\_\_\_

Fire District contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### *To be completed by field personnel:*

Test observed by: \_\_\_\_\_ for Left Hand

Test performed by: \_\_\_\_\_ of \_\_\_\_\_

Static gauge hydrant location: \_\_\_\_\_

Pitot gauge hydrant location: \_\_\_\_\_

Static pressure before flow: \_\_\_\_\_ Residual pressure during flow: \_\_\_\_\_

Pitot reading: \_\_\_\_\_ Nozzle size used: \_\_\_\_\_ Duration of flow: \_\_\_\_\_ min.

COMMENTS: \_\_\_\_\_