



Fire Flow Test Application

PLEASE COMPLETE THIS ENTIRE SECTION:

Applicant Name: _____	Date: _____	CSA: _____
Mailing Address: _____	City: _____	Zip Code: _____
Hydrant Location: _____	Cross Street: _____	
Property Owner(s): _____	Property Address: _____	
Phone Number: _____	Cell Number: _____	Size of Parcel: _____ acres
Assessors Parcel Number: _____	Total Sq. Ft. (existing & new): _____	including garage _____

Intended Use of Property: Single Family Residence Commercial _____ Other _____

Received by: _____ Receipt Number: _____ Date Paid: _____

Pick Up Mail Email: _____ Date Sent: _____

Subsequent field investigations by the Division may determine that other charges and/or actions will be required. An itemized bill will be provided to the applicant. Property will need the address posted and the property lines staked.

****This form on its own is not a guarantee of service and must be accompanied by a valid Water and Sanitation Availability (Will-Serve) Letter issued within the last 12 months prior to a final building permit being issued****

(Office/Field Use Only)

TEST RESULTS

Fire Hydrant 1 (Flow)

Distance from Project: _____

Hydrant #: _____ Hydrant Location: _____

Type: _____ Nozzle Size: 2.5 Start Time _____

Static PSI: _____ Flow in GPM: _____ End Time _____

Pitot PSI: _____ Nozzle C Factor: 0.9

Fire Hydrant 2 (Witness Pressure)

Hydrant #: _____ Hydrant Location: _____

Type: _____ Nozzle Size: 2.5

Static PSI: _____ Residual PSI: _____

Flow calculated at 20 PSI Residual: _____ GPM

Comments: PUMPS "OFF"

Tested by: _____ Date: _____

Reviewed by: _____ Date: _____

DISTRICT ENGINEER OR DESIGNEE

Recertified by: _____ Date: _____

DISTRICT ENGINEER OR DESIGNEE

Return to Special Districts/Development Services at: devservices@sdd.sbcounty.gov

Fire Flow Test Fee: \$225.00 + 10hcf of water at the highest tier for the district.

NOTE: FIRE FLOW TESTS (FFT) ARE ONLY VALID FOR A SIX MONTH PERIOD. CONTACT DEVELOPMENT SERVICES TO RECERTIFY A FFT FOR AN ADDITIONAL SIX MONTH PERIOD.