



To: Fax/Email :		From:	
		Pages: 2 (including cover sheet)	
Phone:		Date:	
Re:	Request for Fire Flow Test	CC:	

• Subject: Fire Flow Request

Quantity	Description
1	Complete Application and submit with the items listed
	in the remarks section below.

If items are not received as listed, please notify sender

Remarks:

APPLICATION REQUIREMENTS

- 1. Fire flow test payment in the amount of \$500.00. Make check payable to California American Water.
- 2. Complete and submit the attached Fire Flow Test Application Form.
- 3. Attach a sketch/location map depicting what hydrants you want to be tested.

Send the above items to:

Spencer Phillips

California American Water 4701 Beloit Dr. Sacramento, CA 95838

If you have any questions, please feel free to contact me at the below information.

Thank you,

Spencer Phillips Sr. Engineering Technician California American Water 4701 Beloit Drive, Sacramento, CA 95838

Tel: (916) 568-4210

Email: spencer.phillips@amwater.com







FIRE FLOW TEST APPLICATION FORM

	Date of Application:		
	Bute of Application.	_	
APPLICANT INFORMATION			
Name:	Owner: Yes	No	
Address: (No. & Street)	(City)	(Zip Code)	
Contact Name:	Phone No.:		
PROJECT INFORMATION			
Project Name:			
Project Address / Description: (Address, Lot, B			
(Address, Lot, B	Block, Tract#, APN, etc.,)		
Service Area: (Nearest Major Cross Streets)			
Request Test Hydrant: (If Known)			
NOTE: Area Map with specific location of	of project is required.		
FIRE FLOW REQUIREMENTS			
esired Flow (gpm): Desired Flow Duration (hrs): (As determined by Fire Department based on Construction Type, Occupancy, Size, etc.)			
	nydrant, and a computed flow at 20psi from the test results, revision of th	residual pressure.	
I hereby request a Fire Flow Test from Calif project/location.	fornia American Water be performed	for the identified	
	(Authorized Signature of Appl	icant)	