



Lathrop-Manteca Fire District
19001 Somerston Parkway
Lathrop, Ca 95330
Administration Office 209-941-5100 ~ Fax 209-941-5115

Application for Fire Flow Request

Date of Application: ____/____/____

Service Request:	Fee:
Fire Flow Information request	\$100
Witness of Fire Flow Testing	\$100
Fire Flow Testing & Results (Performed by LMFD)	\$195

Job Name: _____

Job/Site Location/Address: _____

City: _____ State: _____ Zip: _____

Job Description: _____

On-Site Contact Name: _____ Cell #: _____

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

Cell #: _____ Email: _____

Date(s) of Requested Service (if witness request): _____ (Dates/Times to be determined, not guaranteed)
 (Minimum 5 Business Days Notice Required)

**Provide Site Map. Include Cross streets, street names, hydrant locations, & hydrant #'s (if available).
 If applicant chooses to perform test, applicant shall provide all approved required and appropriate testing equipment, and adequate staff necessary to conduct test and provide traffic control.**

 (Applicant's Signature)

 (Date)

FOR DEPARTMENT USE ONLY		
Date Issued: ____/____/____	[] Paid ____/____/____	Permit No.: ____ - ____
Fee(s): \$ _____		Invoice No.: _____
Inspector: _____		