

Sam Bass Fire Prevention Division Office

16248 Great Oaks Round Rock Texas 78681

Phone: (512)-255-0100 Fax: (512)-255-1288

Request for Testing of Hydrants

All fees paid are non-refundable

BUSINESS NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

CITY-ST-ZIP: _____

ATTENTION: _____ FAX: _____

SIGNATURE: _____ Email: _____

IMPORTANT IMPORTANT IMPORTANT

The Sam Bass Fire Department is responsible for providing test information on the location indicated on this form. There is a \$100.00 fee for conducting this test. It is the requesting party's responsibility to ensure that the information is appropriate to the location of your project. Information provided is an indication of the water supply characteristics in the immediate area on the date and time noted. The Sam Bass Fire Department does not guarantee that this date will be representative of the water supply characteristics at any time in the future. Please attach map indicating hydrant location.

Test Flow Hydrant Address: _____

Flow / Residual Hydrant Address: _____

Hydrant Location (if other than street address): _____

Job Site address: _____

*Please attach map indicating hydrant location.

DO NOT WRITE BELOW THIS LINE

Flow Hydrants:

Size Nozzle: _____

Pitot Reading: _____

Discharge Coefficient: _____

GPM: _____

Static: _____ psi Residual: _____ psi

OFFICE OF THE FIRE PREVENTION DIVISION – TESTING OF HYDRANTS

Fee \$100.00 Paid date: _____ Check Number: _____ Receipt Number: _____

By: _____ Date: _____