

PARADISE IRRIGATION DISTRICT

RESIDENTIAL FIRE FLOW TEST RECORD

A. OWNER INFORMATION

NAME:	PHONE:	DATE:
STREET ADDRESS:	AP #:	
MAILING ADDRESS:	PID ACCOUNT #:	

B. SYSTEM DESIGNER/OWNER REPRESENTATIVE INFORMATION

COMPANY NAME:	PHONE:	LIC. #
COMPANY ADDRESS:		
REPRESENTATVES NAME:	TITLE:	

C. CONSTRUCTION INFORMATION

PROJECT ADDRESS:	
TYPE OF CONSTRUCTION:(CHECK ONE)	NEW _____ REMODEL _____ T.O.P. BUILDING PERMIT NUMBER:

D. WATER SUPPLY AND SERVICE INFORMATION

PID MAIN SIZE _____ MATERIAL TYPE _____	PID SERVICE SIZE _____ MATERIAL TYPE _____
DISTANCE OF FLOW TEST FROM FIRE SUPPRESSION SYSTEM METER LOCATION: (IN FEET)	
COMMENTS:	

E. FIRE FLOW TEST INFORMATION

TEST LOCATION:(ADDRESS AND GENERAL LOCATION OF TEST AND DISTANCE FROM SOURCE)	TEST DATE:
	TEST TIME:
METHOD OF TESTING: (CIRCLE ONE)	TIME/VOLUME <u>7.48</u> (CU. FT.) OTHER _____ DESCRIBE:
STATIC PRESSURE _____ P.S.	DURATION OF FLOW _____ SECOND FLOW RATE _____ GALLONS PER MINUTE

F. COMMENTS

G. TEST VERIFICATION (By signing this contract you are indicating that you agree with the content written in this form)

P.I.D. REPRESENTATIVE	OWNER REPRESENTATIVE
NAME:	NAME:
TITLE:	TITLE:
SIGNATURE: _____ DATE: _____	SIGNATURE: _____ DATE: _____