

Fire Hydrant Flow Test Request



Mail this form with payment to:
 City of North Augusta
 Building Standards Dept.
 P. O. Box 6400
 North Augusta, SC 29861

For questions contact:
 Public Utilities Dept.
 (803) 441-4240

Date Test Requested:	Company
EPWM	Address
Contract:	Contact Name
# of hydrants to be tested	Contact Phone #
Amount paid	Fax #

Map

Legend

Flow Test Request Procedure:

Please circle and initial the fire hydrants you wish to have flow tested on the drawing above. Return this completed form by mail or in person along with a check in the amount of **\$100** payable to the City of North Augusta **for each hydrant** to be tested. Please allow two weeks for test results to be returned.

Hydrant #	Size Outlet	Pilot Press	Flow (gpm)	Static Pressure:	Residual Press.:	Total FH Flow: