



WEST COVINA FIRE DEPARTMENT
FIRE FLOW TEST
1444 W. Garvey Avenue South, Room 218
West Covina, CA 91790
Office: (626) 939-8823

FIRE FLOW TEST FOR: (Check one)

Single Family Dwellings (R-3) Commercial Other Multi-Family Residential

APPLICANT INFORMATION:

Contact Name _____

Contact Telephone/email _____

Applicant's signature _____ Date _____

PROJECT INFORMATION/INSTRUCTIONS:

Applicant to Complete Part I (A) when:

This information is requested to verify **existing** fire flow, fire hydrant location and fire hydrant/underground piping size.

Applicant to complete Part I (A) and (B) when:

This information is being requested as a basis for installing **new** fire sprinkler systems, and/or **new** on-site hydrants.

PART I (A) TO BE COMPLETED BY APPLICANT

Building Address _____

Nearest cross street _____

Approximate Distance from property to nearest cross street _____

Location/Cross Streets of existing fire hydrants (if known) _____

Property Owner _____ Telephone _____

Property Owner address (if different from above) _____

PART I (B)

Occupancy (use of building) _____ Intend to Add Sprinklers New Hydrant

Type of construction _____

Square footage _____ Number of stories _____

**PART II (A) INFORMATION ON FIRE FLOW AVAILABILITY
TO BE COMPLETED BY WATER PURVEYOR**

The distance from the fire hydrant to the property line is _____ feet via vehicular access. The fire flow services will be rendered from a _____ inch diameter water main. The hydrant is located on (street) _____
_____ of _____
(Feet) (Direction) (Nearest cross street)

Under normal operating conditions, the fire flow available from this _____ (Size)
Hydrant is _____ GPM at 20 PSI residual for two hours at _____ PSI Static

**PART II (B) SPRINKLERED BUILDINGS ONLY – REQUIREMENTS
TO BE COMPLETED BY WATER PURVEYOR**

Backflow protection required (fire sprinklers/private hydrant): Yes No

Type of protection required: (Check one)

Double check detector assembly Reduced pressure principal detector assembly

Other _____ Domestic Meter Size (Required) _____

Detector location: (Check one) Above Grade Below Grade Either

PART II (C) TO BE COMPLETED BY WATER PURVEYOR

Water Purveyor _____ Telephone _____

Print Name _____ Signature _____

Title _____ Date _____

PART III TO BE COMPLETED BY THE FIRE DEPARTMENT

The above-provided information has been reviewed and is complete and shows that the minimum requirements, per the California Fire Code Appendices & applicable Code Sections, are met and the property is not in the Very High Fire Hazard Severity Zone.

Approved by _____ Date _____

INFORMATION FOR APPLICANT: A COPY OF THIS COMPLETED AND APPROVED FLOW TEST REPORT SHALL BE INCLUDED WITH ANY UNDERGROUND FIRE SERVICE PLAN, NEW FIRE HYDRANT PLAN, AND/OR NEW FIRE SPRINKLER PLAN THAT IS SUBMITTED TO THE FIRE DEPARTMENT FOR PLAN CHECK AND PERMIT. FLOW TESTS ARE SUBJECT TO FEES CHARGED BY THE INDIVIDUAL WATER PURVEYORS TO BE PAID BY THE APPLICANT.