

TOWN OF WAXHAW FIRE MARSHAL'S OFFICE



HYDRANT TEST FORM

General Information					
Name:		Date:			
Address:					
City:	State:	Zip:			
Phone:					
Email:					
Fire Hydrant Flow Test Requested at the Following Location:					
Business Name:					
Address:		Quantity:			
Applicant Signature :					

Please note that requests are processed within 1-2 business days of receipt.

Hydrant tests are for needed fire flow calculations, hydraulic calculations for fire sprinkler design, and/or standpipe design. Not to be used for the design of domestic systems.

Office Use Only					
Test Date:		Time:			
Pressure					
Static:	psi	Residual:	psi		
Flow					
Residual:	gpm	@20 psi:	gpm		