

ERIE COUNTY
DEPARTMENT OF ENVIRONMENTAL SERVICES
WATER DIVISION

FIRE FLOW TEST REQUEST FORM

APPLICATION INFORMATION

Applicant Name: _____ Request Date: _____

Firm Name: _____
Street Address

City State Zip Code

Cell Phone Number: _____ Office Number: _____

Email Address: _____
All test reports will be sent to the above email address

SITE/TEST INFORMATION

Site Location/Address: _____
Street Address

City State Zip Code

Location of water service connection _____
Must be completed if connection is different from site address and/or not in front of building

Special Instructions: _____

Site Plan/Google Map Attached: Yes No Check #: _____

Must be submitted & checked by Applicant

FOR OFFICE USE ONLY

Check Received: Yes No

Site Plan/Google Map Received: Yes No

Received Date: _____

Work Order #: _____