



**San Bernardino County Fire Protection District
Office of the Fire Marshal/Community Safety Division
Planning and Engineering**



**FIRE HYDRANT WATER FLOW TEST REPORT
TO BE COMPLETED BY A LICENSED C-16 FIRE
PROTECTION CONTRACTOR
NOTE: ALL PUBLIC HYDRANT FLOW TEST REPORTS REQUIRE
WRITTEN APPROVAL FROM THE WATER PURVEYOR**

Property Address/APN:

City/Community:

Name of Company Performing Test:

Phone number:

Date of Test:

Time of Test:

Fire Hydrant Test Port Size:

Flow Hydrant Discharge Coefficient:

Location of Flow Test Hydrant:

Distance to Project:

Location of Gauge Hydrant:

Distance to Project:

Flow Hydrant
Static Pressure:

Gauge hydrant
Residual Pressure:

Flow Hydrant
Pitot Pressure:

Observed Flow:

Calculated Flow at 20
PSI:

Comments:

I certify under penalty of perjury that the above information is a true and accurate representation of the flow test conducted on the above date and time. I also understand that per the California Fire Code water flow reports to design a fire protection system are only valid for six months from date of test.



Tester Name:

Signature

Date:

As a representative of below water purveyor, I hereby release the liability for waterflow test information as provided by others and documented on this form.

Water Purveyor:

Printed Name:

Signature:

Date: