



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



**ONE OR TWO FAMILY RESIDENTIAL
 WATER PRESSURE TEST
 FOR 13D OR CRC13 SYSTEMS ONLY**

**All sections on form must be completed and submitted with residential sprinkler plans, incomplete forms will be returned.
 Pressure test must be taken from private side of water meter or at the base of fire riser.**

Property Address/APN:

City/Community:

Name of Person Performing Test:

Phone Number:

Contractor:

Home Owner:

Date of Test:

Time of Test:

Location of Test:

Static Pressure:

Comments:

I certify under penalty of perjury that the above information is a true and accurate representation of the pressure 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: