

FIRE FLOW TEST REQUEST FORM



COMMUNITY
DEVELOPMENT

Permit Center

710 NW Wall St

Bend, OR 97701

P: 541-388-5580

F: 541-388-5519

www.bendoregon.gov

Submit completed forms to: comdeveng@bendoregon.gov

Applicant Information

Applicant's name _____ Email _____

Company name _____ Phone _____

Address _____
City State Zip Code

Project Information

Project Title _____

Project Address _____

Project Map and Tax Lot _____

Fire hydrant number(s) to conduct model test(s) if known _____

The existing static pressure, residual pressure and flow rate will be provided. For analytical purposes it is assumed that all reservoirs are half-full during a peak summer day. These assumptions are used for all computer model runs and will not be modified.

Due to expansion of the water system and ongoing changes in operations, the City of Bend cannot guarantee specific water pressure or flow will remain at any site. The City designs the municipal system to meet the required fire flow of a minimum residual of 20 psi. As such, the system information provided should only be used as one factor in any engineering design.

By signing this application, you acknowledge that the pressures and flows provided to you are subject to variation with changing conditions.

Applicant's Signature _____

Date _____

Submit completed forms to: comdeveng@bendoregon.gov

Office Use Only

Fee Paid _____

Received By _____

Date _____

File No. _____