

**FORM**

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(Printed on 09-Feb-23 at 11:02)

**(WS-FO-206) Application for a Flow Rate Test****APPLICANT DETAILS:**

CDC / DA \_\_\_\_\_ / \_\_\_\_\_

**IS THIS PART OF A SECTION 68:** Yes ☐ No ☐**S68** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Postal Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

**PROPERTY TO BE TESTED**

Street Address: \_\_\_\_\_

Lot: \_\_\_\_\_ Assessment no: \_\_\_\_\_

DP: \_\_\_\_\_ Parcel: \_\_\_\_\_

Description: \_\_\_\_\_  
(e.g. 6 x Residential Flats)  
(see note 1)Does Building Exceed 25 metres? Yes ☐ No ☐**PURPOSE OF FLOW TEST**Fire Service Yes ☐ (see note 3) No ☐Connection to Town Supply Yes ☐ No ☐Mains extension Yes ☐ No ☐Other Yes ☐ No ☐Is a street hydrant required? Yes ☐ No ☐**If Fire Service:**Internal Hydrants Yes ☐ No ☐ If Yes, how many? \_\_\_\_\_ (see note 3)Hose Reels Yes ☐ No ☐ If Yes, how many? \_\_\_\_\_ (see note 3)Sprinklers Yes ☐ No ☐ If Yes, how many? \_\_\_\_\_ (see note 3)

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**NOTE:**

1. Attach plans or draw plan overleaf, include as much information as possible.
2. Applicable fee (see current Management Plan – Fees & Charges) **MUST** be paid with lodgement of application.
3. Hydraulic Calculation Report will be required for connection/part connection to a fire service.
4. Test results are valid for 6 months.
5. Please work off 40-60mts head pressure to accommodate future installation of pressure reduction valves.

**OFFICE USE ONLY:**Receipt Code **215** Fund: 141117.0521 (Fee **MUST** be paid with lodgement of application)

Payment Amount: \$ \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Date Received: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

CSO Signature \_\_\_\_\_ CRM No. \_\_\_\_\_

Applicant NAR: \_\_\_\_\_ Applicant Notified: Yes ☐ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_Requires Hydraulic Calculation Report? Yes ☐ No ☐

Approved: Quality Systems Manager	Group / System: Utilities	Document ID: WS-FO-206	Version: 5
Relevant To: Water Operations	Date Issued: 23-Jul-08	Revised: 9-Feb-23	Status: Approved
			Page: 1 of 2



## FORM

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# (WS-FO-206) Application for a Flow Rate Test

## SITE PLAN:

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			Page: 2 of 2