



City of Upland Fire Hydrant Flow Test Request Form

Submit the completed form and your payment to the Cashier in the Finance Department. Once payment is received, this form will be forwarded to Water Division staff for processing of data/information requested. If you have any questions regarding this form, please call (909) 291-2930.

Project Address:

Nearest Cross Street: _____

Fire Hydrant Location: _____

Applicant Information

Owner or Requester: _____

Address: _____

Telephone Number: _____

Fax Number: _____

E-mail: _____

Name of Contact Person: _____

Contact Person's Phone Number: _____

Requester's Signature: _____

Print Name: _____ Date: _____

Fee for Fire Hydrant Flow Test: \$270.00
Charge Code: 640697 GL Account: 6400000 4697

This section below to be completed by City Staff

Date Paid: _____ **Receipt No.** _____ **Cash:** **Check:** **Visa:** **MC:** **AMEX:**

Work Order# _____ **Date Submitted to Water Operations:** _____

Date Fire Flow Test Performed: _____

Date Results Submitted to Customer: _____