

HYDRANT / FIRE SERVICE / DUAL SERVICE REQUIREMENTS (FIRE) FORM

FORM APPROVAL IS REQUIRED BY THE FIRE MARSHAL OR AUTHORIZED FIRE AGENCY REVIEWER

Please complete and sign below. If dual service is indicated and approved, please complete the Domestic Dual Services section below. If any change to an existing hydrant and/or fire service is required, please indicate required changes (i.e. upgrade hydrant body, relocate, or remove) in Remarks Section. For questions about this form, contact EBMUD New Business Office at 510-287-1008.

ERTY	PROJECT ADDRESS		CITY		ZIP
PROPERTY	ASSESSOR'S PARCEL №		TRACT/SUBDIVISION	ı	LOT №
FIRE HYDRANTS	□ NEW HYDRANTS NOT REQUIRED □ REQUIRED: Number of NEW PUBLIC hydrants AND/OR Number of NEW PRIVATE hydrants □ RELOCATE: Number of EXISTING PUBLIC hydrants to be relocated	For HYDRANTS please complete the following OR check the box below: A total of gallons per minute supplied by hydrant(s) flowing simultaneously for a duration of minutes. Each individual hydrant shall provide a minimum flow of gallons per minute. Unless otherwise indicated, fire flow is calculated down to at a minimum residual pressure of 20 psi in the water main under normal operating design flow conditions. Fire flow is a design factor and is not guaranteed. □ EXISTING FLOW IS ADEQUATE Remarks			
PRIVATE FIRE SERVICES	Commercial, multi-family premises (as approved by local fire agency). NOT REQUIRED REQUIRED: Number of NEW PRIVATE fire services EXISTING PRIVATE FIRE SERVICE adequate	Remarks			
DOMESTIC DUAL SERVICES	Single family premises, multi-family premises, condos, and townhomes (as approved by local fire agency) NOT REQUIRED REQUIRED: Number of NEW DUAL SERVICES	For DOMESTIC DUAL SERVICES please complete the following: X			
APPROVAL	FIRE AGENCY OR OTHER AGENCY NAME		PHONE		
	PREPARED BY			TITLE	
	EMAIL				
	SIGNATURE (By signing below, I agree I have reviewed and approved the above requirements.)			DATE	
					VALID FOR ONE YEAR