



APPLICATION FOR FIRE FLOW/FLUSH TEST

Application Date: _____ Test Date: _____

Time: _____

Type of Test: _____

Hydrant	Flush	Fire Pump	Trip
Flow Test			

Test Site: _____

Fire Marshall Required? _____
 Yes No

Company name: _____

Address: _____

Phone Number: _____

Company Representative: _____

SALISBURY PUBLIC WORKS CONTACTS:

Trey Klaverweiden: cell: 443-235-7300

Walter Webster: cell: 443-880-1503

Brittney Brown: office: 410-548-3170

FEE DUE AT LEAST FOUR WORKING DAYS IN ADVANCE: \$125(In-City) \$160(Out-of-City)

(payable to: City of Salisbury, 125 N.Division St. – Rm 202, Salisbury, MD 21801-4940)

Please furnish hydrant flow test results to Salisbury Public Works for permanent record