City of Salisbury
Jacob R. Day, Mayor

APPLICATION FOR FIRE FLOW/FLUSH TEST

Application Date: _____ **Test Date:** _____

Time: _____

Type of Test: _____ _____ _____ _____

Hydrant Flow Test **Flush** **Fire Pump** **Trip**

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 provide flow test results to the Department of Infrastructure & Development for record