

Application for Mains Pressure and Flow Rate Enquiry

Requested by <i>(Individual's Name)</i>	<input type="text"/>	Company Name	<input type="text"/>
Telephone Number	<input type="text"/>	Email Address	<input type="text"/>
Postal Address	<input type="text"/>		
Reason for Test	<input type="checkbox"/> Option 1 - Relates to a Proposed Development		
	- DA/CDC/DAP No. <i>(if applicable)</i> <input type="text"/>		
	<input type="checkbox"/> Option 2 - General Pressure Flow Issue Enquiry		
Location of Test	<input type="text"/>		
Date	<input type="text"/>		
Tests Required	Pressure Yes <input type="checkbox"/> No <input type="checkbox"/>	Hydrant Flow Rate Yes <input type="checkbox"/> No <input type="checkbox"/>	
Specify Flow Rates Required (L/s) - please circle			
	<input type="text" value="5"/>	<input type="text" value="10"/>	<input type="text" value="15"/>
	<input type="text" value="20"/>	<input type="text" value="25"/>	<input type="text" value="30"/>
	<input type="text" value="35"/>		
Other Tests: Specify	<input type="text"/>	<input type="text"/>	<input type="text"/>

For a full list of fees applicable see Council's Fees and Charges at www.tweed.nsw.gov.au

OFFICE USE ONLY

Date	<input type="text"/>	Fee Paid \$	<input type="text"/>
Receipt No	<input type="text"/>	Officer	<input type="text"/>

MNEMONIC BackFlowHydTest

Enquiries to Council's Water Admin on (02) 6670 2460 for direction to the responsible officer.

* Refer to Development Engineer before testing (if the request relates to a development proposal).