



# Mains Pressure Flow Rate Testing

10 Graham Place, CASINO  
 19-25 Woodburn Street, EVANS HEAD  
 Locked Bag 10, CASINO, NSW, 2470  
 Phone: 02 6660 0300 Fax: 02 6660 1300 [council@richmondvalley.nsw.gov.au](mailto:council@richmondvalley.nsw.gov.au)

<b>Office Use</b>	<b>Records Only</b>
Date: .....	Land ID: .....
Amount: .....	Property ID: .....
Receipt No: GL – WtrFdPresFlowTest .....	

**Applicant Details**

Name(s): .....

Address: .....

Suburb: ..... Post Code: .....

Phone: ..... Mobile: .....

Email: .....

Applicants Signature: ..... Date: .....

**Testing Required**

Location of Testing: .....

Date Required: .....

Please indicate testing required  Pressure Test  Hydrant Flow Rate

Flow Rate L/s	<b>Nil</b>							
---------------	------------	--	--	--	--	--	--	--

Other Tests (specify) .....

.....

.....

**Operational staff to complete**

Asset location between: ..... and .....

Testing officer name: ..... Date performed: .....

Flow Rate L/s	Nil							
Pressure Kpa								

Maximum flow rate: .....L/s Comments: .....

.....