



**JERSEY CITY MUNICIPAL UTILITIES AUTHORITY**

555 ROUTE 440, JERSEY CITY, NEW JERSEY 07305

PHONE: 201-209-0319 www.JCMUA.com FAX: 201-432-3795

**APPLICATION FOR HYDRANT FLOW TEST**

Date:		JCMUA Project:	
Applicant Name:		Tel. No:	
Contact Person:		Cell No:	
Address:		Fax No:	
City, State, Zip:			
E-Mail Address:			
<b>PROJECT/BUILDING INFORMATION</b>			
<b>Renovation</b>		<b>New Building</b>	
Name:			
Location:		Block:	Lot:
Description:			
<b>LOCATION FOR HYDRANT FLOW TEST</b>			
<p>To request flow test on more than one water main OR on a water main that is not in front of the project street address, Please specify the water main and the location below. Please note that unless otherwise specified, flow test will be conducted on a distribution main 12" diameter or smaller that is closest to the lot or address specified. Flow in a larger transmission main will only be tested if no smaller main is available.</p>			
Main	inches in size at	Street/Ave	(Nearest cross street is )
Main	inches in size at	Street/Ave	(Nearest cross street is )
Main	inches in size at	Street/Ave	(Nearest cross street is )
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Total number of flow test		x \$200 per test = \$	
<b>TOTAL FEES PAYABLE: \$</b>			
<b>Payment must be in the form of a bank check, certified check or money order made payable to the Jersey City Municipal Utilities Authority.</b>			
<b>APPLICANT'S CERTIFICATION</b>			
<b>I certify that the information contained in this application is complete and accurate.</b>			
Name:		Signature:	
TITLE:		Date:	
<b>Payment for the Hydrant Flow Test for the above application has been received in full by the JCMUA</b>			
On Behalf of JCMUA:		Date:	
I Have Selected Hydrant Location based on information provided by applicant and location of hydrants shown on Jersey City Water System Maps (200 scale)			
JCMUA Engineer:			Date: