



**CITY OF ONTARIO – FIRE DEPARTMENT**  
**BUREAU OF FIRE PREVENTION**  
 415 E. “B” Street, Ontario, CA 91764  
 Phone: (909) 395-2029 Fax: (909) 395-2590



## WATER FLOW TEST APPLICATION

**To:** Ontario Fire Department  
 Bureau of Fire Prevention  
 415 E. “B” Street  
 Ontario, CA 91764

**Applicant:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Contractor License Number:** \_\_\_\_\_

**Subject:** Water Flow Test Request

**DAB Number:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_  
 \_\_\_\_\_

**Flow Test Location:** \_\_\_\_\_  
 \_\_\_\_\_

I would like to request a water flow at the above location. I am aware that this will take approximately 4 weeks. I am aware that I need to remit payment to the City of Ontario in the amount of \$216 in one of the following ways:

- |   |   |   |   |
|---|---|---|---|
| <b>1. Mail payment to:</b><br>Ontario Fire Department<br>415 E. “B” Street<br>Ontario, CA 91764 | <b>2. Pay at:</b><br>Fire Permit Counter<br>Ontario City Hall<br>303 E. “B” Street<br>Ontario, CA 91764 | <b>3. Pay by phone with credit card:</b><br>Fire Permit Counter<br>(909) 395-2562 | <b>4. Fill out the credit card information below:</b><br>Send to<br>firepermitcounter@ontarioca.gov |
|---|---|---|---|

**Email:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Contact Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Note: The City will require a signed copy of this application before service is completed.*

**WISH TO PAY BY VISA, MASTERCARD, OR DISCOVER?**

Cardholder Name: \_\_\_\_\_ Cardholder’s Signature: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_ Cardholder’s Zip Code \_\_\_\_\_  
 Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover \_\_\_\_\_ V-Code \_\_\_\_\_  
 Card Number: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_