CALIFORNIA WATER SERVICE COMPANY 1720 North First Street, San Jose, CA 95112 (408) 367-8200

Revised

FIRE FLOW TESTING CHARGE

Cal. P.U.C. Sheet No.

Cal. P.U.C. Sheet No.

8597-W 8006-W

Schedule No. FF

This tariff was approved by the California Public Utilities Commission. Stamped originals are available upon request

#### **APPLICABILITY**

Applicable to all fire flow tests performed or witnessed using utility personnel.

### **TERRITORY**

This fee applies to tests performed on distribution systems in the territories for all California Water Service Company districts.

(T) (T)

( D )

## RATES

(I)

#### SPECIAL CONDITIONS

1. Applicants must complete and submit the California Water Service Company's Fire Flow Test Application.

(To be inserted by utility)

Advice Letter No. 2015-A

Decision No. 10-12-017

Issued by

THOMAS F. SMEGAL
NAME
Vice President

(To be inserted by Cal. P.U.C.)

Date Filed January 27, 2011

Effective January 1, 2011

Resolution No.

| Revised |
|---------|
|         |

Cal. P.U.C. Sheet No. 8598-W

| Cal | P.II | C. | Sheet | N |
|-----|------|----|-------|---|

No. 8007-W

Canceling Original

Utility Form No. FF-1

# FIRE FLOW TEST APPLICATION

This tariff was approved by the California Public

| <u>rı</u>   | RE FLOW TEST APPLICATION                         | Utilities Commission.   |
|---|--|-------------------------|
| CALIFOR   | NIA WATER SERVICE COMPANY                        | Stamped originals ar    |
|   | FLOW TEST APPLICATION                            | available upon reque    |
| California Water Service Company (Cal Water)        | charges \$525.00 for each fire flow test that is | s performed or (I)      |
| witnessed by Cal Water personnel. Discounts         | for multiple tests being requested are not ava   |                         |
| \$525.00 is due in advance of Cal Water perform     | ning or witnessing the fire flow test.           | (1)                     |
| This section is to be completed by t                | he Applicant (One fire flow test request per A   | pplication Form)        |
| Print Applicant or Contact First and Last Name; Ir  | nclude Company Name if Applicable                |                         |
| Print Applicant or Contact Mailing Address: Stree   | et or PO Box                                     |                         |
| Print Applicant or Contact City, State & Zip        |  |                         |
| Print Applicant or Contact Phone Number             |  |                         |
| Print Address/Location where Fire Flow Test is Ro   | equested   |                         |
| Check the appropriate box below and provide the     | information needed to indicate how the test resu | ults are to be sent by  |
| Cal Water. Please note that some local fire ago     | encies require original signed forms, in which   | n case the test results |
| will be sent in the mail.                           |  |                         |
|   |  |                         |
|   | Mailing Address:                                 |                         |
|   |  |                         |
|   | E-mail:  |                         |
|   | Fax No.:   |                         |
|   |  |                         |
| Signature   | Date   | _                       |
| Return the completed form and fee to:               | California Water Service Company                 |                         |
| Please make the check or money order                |  | ( N                     |
| payable to California Water Service Company         |  | (N                      |
| This section to be co                               | mpleted by California Water Service Compan       | x                       |
| Amount and date received:                           | Acc  | ct. Code:               |
| Cal Water personnel receiving the fire flow test fe | e:   |                         |
| Date completed documents sent to applicant:         |  |                         |
| Cal Water personnel sending completed docume        | nts:   |                         |
| Other:  |  |                         |
|   |  |                         |
|   |  |                         |
|   |  |                         |

(To be inserted by utility)

Issued by

(To be inserted by Cal. P.U.C.)

Advice Letter No. 2015-A Decision No. 10-12-017 THOMAS F. SMEGAL NAME Vice President

Date Filed January 27, 2011 Effective January 1, 2011 Resolution No. \_\_\_\_\_