

# Fire Service Flow Test Only No Certification Booking Form



A.F.S.P.A.B Accredited Certifier: Hydrants and Hose Reels  
Portable Fire Equipment

**Date of Application:** \_\_\_\_\_

(Please include as much detail as possible to ensure an accurate assessment)

## Test Type – please select type of test / report required

Flow Test Only –No reports on system equipment will be made.

## System test is for –

Client Name:

Client Address:

Suburb:  State:  Postcode:

## Invoice to go to –

Client Name:

Client Address:

## Site Detail –

Premises Name:

Address:

Suburb:  State:  Postcode:

Contact Name:  Contact Phone:

Size of building (include awnings, canopies etc.):  sq / mt

Number of stories:  Building Class:

### FWSR Group

RTO 45221 | REC 24757

ABN 97 162 393 035

28 Sunline Drive, Truganina VIC 3029

33 Florence Street, Shepparton VIC 3630

P 1300 886 208 | F 1300 853 849

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FO020 Fire Service Flow Test Only Booking Form V2



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## System Description –

Number of Hydrants	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Number of Hose Reels	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Booster	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Pumpset(s)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Sprinkler System Installed	<input type="checkbox"/> YES	<input type="checkbox"/> NO

## Other Information –

**\*Client works order to be attached with this form\***

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