

Louisville Water Company Customer Information Sheet

Fire Services

Date of Request:	Name:					
Company Name:						
Address: House Number and Street		City	State	Zip		
Phone #:	Email:					
Address Location of Requested Service: _						
Service Size & Type: Main Size:	Pipeline Map No:		NSA Re	p:		
Quote: Estimate	<u>OR</u>	Rate Schedule	Lis	st fee		
Comments:						
LWC Hydraulic Review Data Source:	Data Details:					
Date:	Ground Eleva	tion:				
Description:	Static Pressure	e:1	psi			
Pressure Zone:	Flow:	gpm at	psi			
Signatures:						
Hydraulic Engineer:			Date:			
Chief Engineer*:			Date:			



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Supplemental Sheet

Lo	cation of Requested Fire Service:							
1.	Fire Flow desired at the public service	connection:						
	What is the fire suppression system design flow?							
			What is the l	hose stream flow? _	gpm			
	Is the	e design flow provi	ded by a fire pum	p? Yes No				
	If a pump is provided, what	t is the maximum f	low that the pump	will be tested at? _	gpm			
		Will a st	andpipe be provid	led? Yes No)			
	If a standpipe	e is provided, what	is the design flow	of the standpipe? _	gpm			
	What is the MA	XIMUM flow rate	that will pass thre	ough the service?	gpm			
2.	How many private hydrants will be sup	oplied by the new s	ervice?					
3.	Will service be used for any other purp	ose than fire sprint	kler system protec	etion? Yes ?	No			
4.	Does facility/building require a 2 nd fire	service connection	n from LWC?	Yes No				
wa to c res late	ote: Louisville Water cannot guarantee a nter. In reviewing the service application comply with regulatory requirements an exponsible for the design of the service in est version of Louisville Water Compan company website for service eligibility an	n for hydraulic capa ad maintain its distr cluding its size nor y's Service Rules a	acity, Louisville V ribution system fact the adequacy of p and Regulations fo	Water is only review cilities. Louisville Voressure. Please referenced on the Louisvil	Vater is not er to the			
Sig	gnature:	Print N	ame:					
Tit	tle:	Date:	Phone N	o				
Ce	ell Phone No.	Email Address:						
Re	lationship to property owner:							