

Flow and Pressure Test – 2024/25 Application Form

PURPOSE OF FORM: This form will be used to process your application for a flow and pressure test.

APPLICANT DETAILS

Applicant's Name:					
Postal Address:					
Suburb:		State:		Postcode:	
Email:					
Phone:		Mobile:			

PARTICULARS OF PROPERTY

Property Address:			
Lot Number:		Plan Number:	
Property Owner's Full Name:			

WBW FLOW AND PRESSURE TESTS

i	Double Hydrant – incremental to max flow with pressure residual	2024/2025 Standard Fee \$769.00
i	Other	

PAYMENT METHOD

i	Cash - Pay via reception, in person – Do not send cash through mail.	PLEASE NOTE: Wide Bay Water will only commence action required upon full receipt of payment.
i	Cheque - All cheques should be made payable to Fraser Coast Regional Council.	
i	Credit Card - DO NOT record details on this form. Contact will be made with you upon receiving this application to obtain credit card details.	

.....
Applicant Signature

.....
Date

OFFICE USE ONLY

Receipt Officer to Complete:

Tester to Complete:

Payment Date:

Date Test Completed:

Amount Paid:

Test Officer Name:

Receipt Number:

eDOCS Number: