

HYDRANT FLOW TEST APPLICATION-SEABROOK NH

Please bring completed application and \$50.00 fee to the water office, or mail to:
Seabrook Water Department, 550 Rte 107, PO Box 456, Seabrook, NH 03874 (603) 474-9921

DATE: 11/9/23

FEE: \$ 50

HYDRANT FLOW TEST LOCATION: 85 Ledge Rd.
(Street Name/Number if applicable)

MAP: _____ LOT: _____ SEQ: _____ DATE/TIME OF TEST: _____

APPLICANT'S NAME: KEITH PALMER Email: KEITH@DASAFP.COM

BUSINESS NAME: DAS Fire Protection

MAILING ADDRESS: 3 Stanley Tucker Dr. Newburyport

CONTACT NAME: Keith Palmer PHONE #: 978 360 8459 MA. 01450

NOTE: PLEASE ATTACH A COPY OF YOUR CERTIFICATE OF INSURANCE

I: Keith Palmer Business Owner Signature agree, I will not hold the Seabrook Water Department

responsible for any damages to property, which may be incurred during, or as the results of this hydrant flow test.

CHECK PAYABLE TO 'SEABROOK WATER DEPARTMENT' MUST ACCOMPANY THIS APPLICATION

Please call: Curtis Slayton, Water Superintendent at (603) 474-9921 to set up your appointment.

(CS)

run off must not create a hazard for the public pump down
Please do not write below this line - office use only Hydrant after use/ water Department must be on site

RECOMMENDATION OF WATER SUPERINTENDENT: [Signature] 11/14/23
Date

BOARD OF WATER COMMISSIONERS:

REASON FOR DENIAL: _____
Chairperson of the Board

DATE APPROVED: _____