

FIRE SERVICE FORM GUIDELINES – PLEASE READ CAREFULLY

NOTE: This Fire Service form is designed to be used in concert with EBMUD's online Water Service Application.

1. WORK WITH YOUR LOCAL FIRE MARSHAL TO COMPLETE THIS FORM

With the exception of an irrigation-only meter, all new services will require review by your local fire marshal to ensure that your project meets fire safety requirements. You can request flow and pressure information for your fire service design at www.ebmud.com. Submit your fire service plans to your local fire marshal, and have them complete and sign this form.

HYDRANT / FIRE SERVICE / DUAL SERVICE REQUIREMENTS

Use this Fire Service form if any new and/or changes to existing hydrants and/or fire services are required as part of your construction project OR if project requires Dual Service (Combined domestic/fire service). Please consult your local fire agency for their requirements.

All applicants, except irrigation-only, submit this page after completion by your local fire marshal.

- Applications for hydrants must be accompanied by an approved underground hydrant exhibit with onsite pipe size and connection point to main shown.
- Applications for private fire services must be accompanied by an approved sprinkler plan or underground plan with onsite pipe size and connection point to main shown, and/or an approved hydrant exhibit (if applicable).
- If relocation or removal of an existing hydrant or fire service is required, approved plan should show existing and proposed new locations when applicable.

2. ONCE THIS FORM IS APPROVED & SIGNED, PROCEED WITH THE ONLINE APPLICATION PROCESS AT EBMUD.COM

An overview of the online water service application process is included below.





HYDRANT / FIRE SERVICE / DUAL SERVICE REQUIREMENTS

FIRE MARSHAL:

Please complete and sign below. If dual service is indicated and approved, please complete the Domestic Dual Services section below. If any change to an existing hydrant and/or fire service is required, please indicate required changes (i.e. upgrade hydrant body, relocate, or remove) in Remarks Section. For questions about this form, contact EBMUD New Business Office at 510-287-1008.

| | | | |
|-----------------|----------------------|-------------------|--------|
| PROPERTY | PROJECT ADDRESS | CITY | ZIP |
| | ASSESSOR'S PARCEL Nº | TRACT/SUBDIVISION | LOT Nº |

TO BE COMPLETED BY FIRE MARSHAL

| | | |
|----------------------|--|---|
| FIRE HYDRANTS | <input type="checkbox"/> NEW HYDRANTS NOT REQUIRED <input type="checkbox"/> REQUIRED: Number of NEW PUBLIC hydrants _____ AND/OR Number of NEW PRIVATE hydrants _____ <input type="checkbox"/> RELOCATE: Number of EXISTING PUBLIC hydrants to be relocated _____ | For HYDRANTS please complete the following OR check the box below: A total of _____ gallons per minute supplied by _____ hydrant(s) flowing simultaneously for a duration of _____ minutes. Each individual hydrant shall provide a minimum flow of _____ gallons per minute. Unless otherwise indicated, fire flow is calculated down to a minimum residual pressure of 20 psi in the water main under normal operating design flow conditions. Fire flow is a design factor and is not guaranteed. <input type="checkbox"/> EXISTING FLOW IS ADEQUATE Remarks _____ |
|----------------------|--|---|

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|------------------------------|--|----------------------------|
| PRIVATE FIRE SERVICES | Commercial, multi-family premises (as approved by local fire agency). <input type="checkbox"/> NOT REQUIRED <input type="checkbox"/> REQUIRED: Number of NEW PRIVATE fire services _____ <input type="checkbox"/> EXISTING PRIVATE FIRE SERVICE adequate | Remarks _____ _____ |
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|-------------------------------|---|---|
| DOMESTIC DUAL SERVICES | Single family premises, multi-family premises, condos, and townhomes (as approved by local fire agency) <input type="checkbox"/> NOT REQUIRED <input type="checkbox"/> REQUIRED: Number of NEW DUAL SERVICES _____ | For DOMESTIC DUAL SERVICES please complete the following: $\text{_____ Sprinkler heads} \times \text{_____ Demand per head, GPM} = \text{_____ Sprinkler Demand, GPM}$ <p><i>Maximum number of sprinkler heads required to operate simultaneously in the largest area to be sprinklered.</i></p> <p><i>Flow required for each sprinkler head to operate (in gallons per minute).</i></p> Remarks _____ |
|-------------------------------|---|---|

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|------------------------------|--|-------|
| FIRE MARSHAL APPROVAL | FIRE AGENCY NAME | PHONE |
| | PREPARED BY | TITLE |
| | EMAIL | |
| | SIGNATURE (By signing below, I agree I have reviewed and approved the fire service plan for above address location.) | DATE |

VALID FOR ONE YEAR