



PUBLIC WORKS DEPARTMENT

220 Fourth Ave S
 Kent, WA 98032

PHONE: 253-856-5500

City of Kent Fire Flow Availability Certificate

TO BE FILLED OUT BY APPLICANT: **Date of Request:** _____
 Applicant's Name: _____ Phone No.: _____
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Proposed Use: _____
 Location/Address: _____
 King County Tax Account No(s).: (Attach map and legal description if necessary)

TO BE COMPLETED BY CITY OF KENT WATER DEPARTMENT:

Available Fire Flow Information from project specific modeling	
	The existing system can provide not less than _____ GPM at a residual pressure of not less than 20 PSI with no system improvements required
	Completion of the following water system improvements described below: Project Name: _____ Permit No. _____ is analyzed to provide available flow of not less than _____ GPM while maintaining a residual pressure of not less than 20 PSI for not less than _____ hrs. The analysis is based on _____ maximum day demands, a residual pressure of not less than 20 PSI in the distribution system at the site and throughout the pressure zone in which the development is served. Pressure analysis was performed under peak hour demand conditions. Available flow is "derated" to meet velocity and adapted pressure standards.

Prepared by: _____ Title/Org.: _____
 Signature: _____ Date: _____