

**OAKLAND COUNTY WATER RESOURCES COMMISSIONER**

ONE PUBLIC WORKS DRIVE • BUILDING 95 WEST • WATERFORD, MICHIGAN 48328-1907

PHONE (248) 858-4310 • [WRCFlowTest@oakgov.com](mailto:WRCFlowTest@oakgov.com) • [www.oakgov.com/water](http://www.oakgov.com/water)**FLOW TEST REQUEST****PROPERTY DESCRIPTION****CUSTOMER INFORMATION**

No.: \_\_\_\_\_ Street: \_\_\_\_\_

Customer's Name

Subdivision: \_\_\_\_\_

Customer's City and Zip Code

Municipality: \_\_\_\_\_

Customer Phone Number

Major Cross Roads: \_\_\_\_\_

**Customer Email - Required**

Reason for Flow Test: \_\_\_\_\_

**COMPUTATION OF CHARGES**

*Flow Test Permit (Regular business hours)	\$275.00
Other	
Total	\$

\*If, when in the field, the customer elects to perform additional flow tests on additional hydrants and/or the duration of the flow test lasts longer than 2 hours, additional invoices will be generated and will be mailed to the customer's address. No taps will be allowed until all invoices have been paid in full.

**NOTE:** Flow test results (flows and pressures) only indicate the distribution system's ability to deliver water at a given point, at a given time and day, under current demand conditions. Results will vary hourly, monthly, daily and yearly. Results obtained from this flow test are to be used as an estimate only.

**Signature of Customer  
or Customer's Agent:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**PLEASE RETURN TO [WRCFlowTest@oakgov.com](mailto:WRCFlowTest@oakgov.com) FOR REVIEW**

Customer Service Unit Use Only:	
Fees Collected:	<input type="checkbox"/> Yes <input type="checkbox"/> No Initials: _____
Date:	_____
Return to:	Tim Artes <a href="mailto:artest@oakgov.com">artest@oakgov.com</a> AND NORTH – David Vicini <a href="mailto:vicinid@oakgov.com">vicinid@oakgov.com</a> SOUTH – Ruth Allor <a href="mailto:allorr@oakgov.com">allorr@oakgov.com</a> AND Bruce Horner <a href="mailto:hornerb@oakgov.com">hornerb@oakgov.com</a> With copy of receipt