



PARADISE FIRE & RESCUE
767 Birch Street, Paradise, CA 95969
(530) 872-6264

FIRE FLOW/HYDRANT LOCATION REQUEST FORM

DATE: _____ [] CASH [] CHECK NO. _____

SITE ADDRESS: _____ AP#: _____

[] Basic (New Construction) [] Intermediate (Parcels larger than one acre) [] Complex (Land Division)

Construction: [] Residential [] Commercial Type: [] New [] Remodel [] Addition

Purpose: [] Dwelling [] Garage/Shop [] Other: _____ (Planning Application)

Type of Exterior: [] Wood [] Stucco [] Other: _____

Total Size of Construction: Square Feet _____ [Include all stories, attached structures (including garage), and structures that are within 20 feet of each other for Commercial construction.]

Site plan provided [] Yes [] No [] N/A

Is this a Manufactured Home? [] Yes [] No [] N/A

Does existing structure have automatic sprinkler system? [] Yes [] No [] N/A

Is proposed building attached to existing structure? [] Yes [] No [] N/A

Important Note: Access ways more than 150 feet in length will require a turn-a-round in accordance with the Town of Paradise Road Standards. Both single family dwellings and Land Use Entitlements, minor land division or parcel map applicants are required to meet with the Town of Paradise Road Standards and the Fire Code for accessibility.

I understand that the information herein provides only the fire flow for this site and does not address the specific requirements for a certain project on the site, *including access*. [] Fire Department does not have a site plan showing access to my property it is my responsibility to ensure that access is provided as required by code. Any changes to the above listed total square footage or construction type will require that the Fire Department be notified to re-evaluate the fire flow.

THIS INFORMATION IS GOOD FOR ONE YEAR FROM THE DATE OF THE FLOW TEST. Applicant will be required to apply again for the Fire Flow information after this expiration date.

AUTOMATIC SPRINKLER SYSTEM PLANS SHALL BE SUBMITTED AND APPROVED BEFORE INSTALLATION OF THE SYSTEM OR ANY SITE INSPECTIONS. APPLICANT ALSO NEEDS TO CONTACT PARADISE IRRIGATION DISTRICT FOR "BACK FLOW PREVENTION DEVICE" INSTALLTION REQUIREMENTS.

Person/Agency Requesting Flow (please print): _____

Signature: _____ Phone: _____ Cell: _____

Email: _____

Mailing Address (Required): _____

THE PERSON REQUESTING THIS REPORT IS RESPONSIBLE FOR GIVING THE INFORMATION IN THIS REPORT TO THE OWNER/CONTRACTOR/PERMIT HOLDER.