

Port Macquarie-Hastings Council  
 PO Box 84  
 PORT MACQUARIE NSW 2444  
 p (02) 6581 8111  
 e council@pmhc.nsw.gov.au

pmhc.nsw.gov.au

# Application Water Pressure Enquiry

<b>Applicant Details</b>			
Applicant:		Contact Person:	
Phone:		Email:	
Postal address:			
Suburb:		Postcode:	
<b>Property Details (where pressure is required)</b>			
Owner of property:		Phone:	
Lot/DP:		Street Number:	
Street Name			
Suburb:		Postcode:	
<b>Connection Details:</b>			
Street Location:		Side of street (N, S, E, W)	
Nearest Cross Street:		Distance and direction from nearest cross street: (M) (N, S, E, W)	
<b>Estimates of Watermain Pressure Required for (please tick)</b>			
<input type="checkbox"/> 1. Fire Hose reel installation minimum pressure (AS 2441)			
<input type="checkbox"/> 2. Fire Hydrant Installation (AS 2419)		10L/s	20L/s
<input type="checkbox"/> 3. Fire Sprinkler or Wall Drencher Installation (AS 2118)		L/s	L/s

**Notes:**

1. Pressure estimates will be in accordance with the Australian Standards shown and specified in the Building Code of Australia.
2. The price charge for each service ticked above will be in accordance with Council's current fees and charges.
3. Maximum and minimum pressures are the range within which pressure will normally occur. Port Macquarie-Hastings Council will not accept any liability if under exceptional circumstances pressures are outside this range.

*I acknowledge that the information supplied in relation to the expected maximum and minimum pressure available in the watermain is determined from computer modelling and that no actual test is conducted by Port Macquarie-Hastings Council.*

Office Use: Code: 301	Amount Paid:	Receipt:	Date:
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