



CITY OF FRAMINGHAM

DEPARTMENT OF PUBLIC WORKS | OPERATIONS

OPERATIONS CENTER
100 Western Avenue
Framingham, MA 01702

508-532-6050
water@framinghamma.gov
www.framinghamma.gov

HYDRANT FLOW TEST APPLICATION

APPLICATION DATE: _____

APPLICANT NAME: _____ TELEPHONE: _____

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

LOCATION OF REQUESTED FLOW TEST: _____

OF TESTS REQUESTED: _____ X \$200 PER TEST = \$ _____
TOTAL CHARGES

PAYMENT TYPE: CASH _____ CHECK _____

PAYMENT RECEIVED BY: _____

PAYMENT LOCATION: CITY OF FRAMINGHAM - DEPARTMENT OF PUBLIC WORKS
100 WESTERN AVE
FRAMINGHAM, MA 01702
508-532-6050

INTERNAL USE ONLY: PLEASE EMAIL COMPLETED FORM TO:

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