

**LA HABRA HEIGHTS COUNTY WATER DISTRICT
WATER AVAILABILITY STATEMENT**

PART I – INFORMATION

Tax Assessors Number _____

Building Address _____ Number of Stories _____

Property Type: Primary House _____ ADU House _____ SB 9 House _____

Nearest Cross Street _____ Distance to Nearest Cross Street _____

Property Owner _____
Name Telephone No.

Address City Zip Code

Signature of Applicant _____ Date _____

PART II – STATEMENT OF POTABLE WATER SERVICE

☐ A. Potable water service is available to the above referenced property with an estimated _____ psi static pressure at the meter. The meter size is _____ inches.

☐ B. Potable water service is NOT available to the above referenced property until financial arrangements have been made in accordance with comments, below.

PART III – STATEMENT OF FIRE FLOW

☐ Fire flow test was performed in the field.

A fire flow test was made on a fire hydrant located at _____.
Fire hydrant configuration: _____ inch riser with _____ x _____ opening head. The flow was _____ GPM at 20 psi residual pressure. Static pressure in the water main at the location was _____ psi. (The La Habra Heights County Water District will supply only such quantities of water at such pressure as may be available from time to time because of the normal operations of the system and shall have no liability for loss or damage to persons or property resulting from inadequate pressure or flows.)

☐ Fire flow test was computer model simulated.

Fire flow scenarios are set for Maximum Day Demand (MDD) plus the required fire flow. All pumps and water system interconnections are off in the system and reservoirs are set at ½ full. Flow results of the simulation are provided at 20 psi residual. The flow was _____ GPM at 20 psi residual pressure.

A. The distance from the fire hydrant tested to the proposed structure is _____ feet, by way of vehicular access. (This distance was determined from plot plan furnished to the District and on file with the District, or by physical measurement.)

B. ☐ Distance between proposed structure and fire hydrant cannot be certified since information was not provided to the District.

PART IV – COMMENTS

This statement is valid for 1 year from the date hereon. It is valid only for the owner appearing in Part I.

Signature _____ Title _____ Date _____

cc: City of La Habra Heights Applicant

LA HABRA HEIGHTS VOLUNTEER FIRE DEPARTMENT

Approved by _____ Date _____ Disapproved by _____ Date _____