



Irrigation Permit Application

1. PROJECT INFORMATION			
Project Address:		Project Name / Description:	
Building Permit? <input type="checkbox"/> Yes <input type="checkbox"/> No; if Yes, provide Building Permit number:			
Additional Information:			
Type of Work (check one): Residential _____ All Others _____			
Work area Size: _____ sq.ft.			
Water Source (Check One): City _____ Water Well _____			
Irrigation Service Size: _____			
Method (Check One): Drip _____ Rotors _____ Grey Water _____ Other _____			
Backflow Type (Check One): Double Check _____ RPZ _____ Other _____			
2. BUILDING OWNER INFORMATION			
Name:	Address:		City/State/Zip:
Phone:	Fax:	Email:	
3. IRRIGATOR INFORMATION			
Name:	Address:		City/State/Zip:
Phone:	Fax:	Email:	
5. PLEASE READ CAREFULLY			
<ul style="list-style-type: none"> ➤ Be advised incomplete applications may be rejected, denied or cause permit processing delays. ➤ This permit becomes null and void if work authorized is not commenced within 180 days of issuance or if work is suspended or abandoned for a period of 180 days at any time after work is commenced. ➤ I hereby certify that I am the property owner or their authorized agent and have the owner's consent to apply for the permit requested and receive all subsequent communications and business related to this application. I further certify that the information provided is true and correct to the best of my knowledge. This work shall comply with all provisions of laws and ordinances, whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any federal, state or local law regulating construction or the performance of construction. 			
Signature of Applicant:		Date:	
Printed Name of Applicant:		Phone:	
Email:		Fax:	