

## APPLICATION FOR RELIEF FROM COMPLIANCE WITH WATER CONSERVATION ORDINANCE

DATE:			CU	RRENT	WA	TER ALER	T STAGE:				
CONTACT INFORMATION											
Name of Business or Resident:											
Contact Person (for Businesses):											
Address:											
Phone:			Fax:								
E-mail:											
Lot Size of Household or Business (in square feet):				Number of Employees/Residents:							
EXISTING FACILITY / RESIDENCE IMPROV	EMENTS										
Number of High Efficiency Toilets:				Т	otal	Number of	Toilets:				
Number of Low Flow Showerheads:				Т	otal	Number of	Shower Heads	s:			
Number of Aerators on Faucets:				Т	「otal	Number of I	Faucets:				
High Efficiency Clothes Washer (Make and Model):											
Weather-Based Irrigation Controller (Make and Model):											
Water Efficient Spray Nozzles on Turf (List Type):											
Turf Removed (List Square Footage):											
Turf Replaced With:											
REQUEST INFORMATION											
Requested Time Period for the Relief from Compliance:	Start Date						End Date				
Requested Watering Days (circle all that apply):	Sunday	y Mo	onday	Tuesda	ay	Wednesday	/ Thursday	Friday	Saturday		
Requested Watering Times (time of day):	A	A.M. / P.	M.			A.M. / P.M.		A.M. / P	<sup>2</sup> .M.		
Requested Length of Watering (per cycle): mir			es								
Requested Number of Watering Cycles:											
This request for relief from compliance application will be used to determine the basis for the request. A site visit to validate information and to ascertain if any other measures can be taken may be performed prior to acceptance of application. If approved, you will receive written notification of approval, which may include instructions.											
FOR INTERNAL USE ONLY:											
Approved Date:		Α	pprove	d By:							



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The following information must be attached with the application at the time of submittal:

- 1. Photographs, maps and/or drawings that illustrate the need for relief from compliance in the current watering stage (i.e. photos of installed water saving/efficient devices).
- 2. Information that can substantiate the applicant's request (i.e. past water bills showing reduction in use, any medical information pertaining to the need for water use, etc.).

For questions regarding this form, please call (951) 736-2234.

Please send completed application and supporting documentation to:

City of Corona Utilities Department 755 Public Safety Way Corona, CA 92880 (951) 736-2455 Fax