



Temporary Irrigation Permit Application

SITE	Address:		
OPERATOR	Name:		Phone (home):
	Address:		Phone (office):
	City:	Postal Code:	Cell:
Country:	Email:		

REASON FOR PERMIT REQUEST:

WATER USE METHOD (Please check – for definitions, refer to Bylaw No. 2428, 2024)

Automatic In-Ground Irrigation

By Hand/Manual

Sensor Driven Automated Irrigation

Signature of Owner or Agent

Date

Office Use Only:

Fee \$75.00

Cash

Cheque

Credit Card

Account: 3400 Program: 6632 Permit Issued

Date of Issue: _____

Expiry Date: _____

Sprinkling Permit Number: _____

Approved by: _____

Date _____

Original to: Infrastructure Services

Copies to: Bylaw Finance