

THE CITY OF SAN DIEGO

Emergency Water Regulations SDMC 67.38 Variance Request

For Plant Establishment of a Low Water Use Landscape

Control #	Date RECD
Section I: Customer Information	
Name (Last, First, MI):	
Account #:	
Service Address:	
Mailing Address:	
Phone #: () Email:	
Alternate Phone #: ()	
Section II: Property Information	
1. Total number of occupants (does not apply to commercial variance requests):	
2. Total irrigated landscape area: Sq. Ft. or acres	
4. Total size of pool(s)/spa(s) (if present):gallons. Fountains:	gallons
5. Meter size(s) (Check bill to determine):	
6. Variance Request: I am requesting a variance from Municipal Code §67.3806 due	to watering
requirements of my newly planted low water use landscape.	
7. Proposed alternative to Code that accommodates your needs while achieving wa	ater reduction: I

propose to water more frequently (only between the hours of 6 pm and 10 am) for a period of ______ months. After this period of time my low water use landscape will be watered no more than two times a week per Municipal Code §67.3806 and will save more water than my prior turf.

Section III: Administrative

Processing Fee Check Number: ______ (One processing fee per site- largest meter size applies) Note: Fee is non-refundable. Make check payable to: City Treasurer. For residential customers, a fee waiver is available based upon HHS poverty guidelines. Request Attachment B.

- Meter between ¾" and 1" \$25 processing fee
- 1 ½" meter \$50 processing fee
- $\geq 2''$ \$100 processing fee

I certify under penalty of perjury that all the information provided is truthful and correct. I understand that this form is required to be submitted to the City of San Diego, and that all information provided is subject to verification by the City. The City may request additional information and/or inspection of the interior and exterior of the premises. Knowingly providing false or misleading information for the purpose of receiving a variance is subject to civil and criminal penalties, including, but not limited to, issuance of an Administrative Citation in an amount up to \$1000.

Customer Signature: ____

Date: ____

Send this form along with processing fee to: City of San Diego Public Utilities Dept., 525 B Street, Suite 300, San Diego, CA 92101, Attention: Variance.

Variance requests will be processed within 3 weeks of receipt. Customers will be notified of determination by mail. For questions call (619) 533-7548/ 533-5312.