



IRRIGATION METER AREA CHANGE REQUEST FORM

Account Name _____ Account # _____ - _____

Meter Number _____ Number of Controllers on this Meter _____

Looped Meter? Yes / No If looped, account number & meter # for other looped service _____

Contact Info: Name _____ Company/Organization _____

Email Address _____

Phone Number (Will be contacted between the hours of 8am and 5pm) _____

The purpose of this form is to request a change in irrigable area associated with the account and meter listed above. If you request an irrigable area change, please complete this form and return it to SMWD. SMWD will review this request and may require to meet you in the field to verify the irrigable area change.

Additional landscape area

Total square feet of irrigable area: _____

Submit the worksheet on page 2 along with a general map or sketch showing the location and irrigable area of the site.

Do not include the hardscape area (e.g. driveways, patios, playgrounds) as part of the total irrigable area.

Record all dimensions in feet and total area in square feet.

Changes to irrigable area are effective the date the request is approved by the District.

I declare, under penalty of perjury, that I am the above account holder and the information contained herein, including supporting documentation and attachments, is complete and accurate. I understand, acknowledge and agree that if a variance is granted, SMWD has the right to enter and inspect the interior and exterior of my property to verify that the conditions or circumstances for which the variance was granted are true and correct. I further understand that I may be liable for back charges if I provide false or misleading information. Knowingly providing false or misleading information for purposes of receiving a variance may be subject to civil and criminal penalties. I agree to notify SMWD within 10 days if any of the conditions or circumstances for which my variance was granted have changed.

Signature

Phone

Date

District Use Only

Approved _____ Denied _____ Increase in CCFs _____ Signature _____ Date _____

SMWD Irrigation Meter Area Change Worksheet

For each controller associated with the meter, please provide the following valve information, using additional sheet(s), if needed. For each valve, circle T for Turf or P for Planters (shrubs, groundcover, or a mixed zone) and provide the irrigable area.

Account Number: _____ – _____

Meter Number: _____

Valve #	Plant Type	Square Feet	Valve #	Plant Type	Square Feet
1	T or P	_____	17	T or P	_____
2	T or P	_____	18	T or P	_____
3	T or P	_____	19	T or P	_____
4	T or P	_____	20	T or P	_____
5	T or P	_____	21	T or P	_____
6	T or P	_____	22	T or P	_____
7	T or P	_____	23	T or P	_____
8	T or P	_____	24	T or P	_____
9	T or P	_____	25	T or P	_____
10	T or P	_____	26	T or P	_____
11	T or P	_____	27	T or P	_____
12	T or P	_____	28	T or P	_____
13	T or P	_____	29	T or P	_____
14	T or P	_____	30	T or P	_____
15	T or P	_____	31	T or P	_____
16	T or P	_____	32	T or P	_____

Total Irrigable Area: _____ **square feet**

Please submit this form with all applicable attachments to:

Santa Margarita Water District
 Attention: Customer Relations Department
 P.O. Box 7005
 Mission Viejo, CA 92690

Or hand deliver to District Office at 26111 Antonio Parkway, Rancho Santa Margarita, CA 92688