

St. Petersburg Sensible Sprinkling Program, Phase 8 Application Form

APPLICANT INFORMATION	
Complete Name:	
Street Address with Zip Code:	
Mailing Address (if different from Street Address):	
Daytime Phone Number:	Email Address:
Best Time To Call:	Preferred Method of Communication: <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Either
How did you find out about this Program? <input type="checkbox"/> Friend/Family <input type="checkbox"/> Neighbor <input type="checkbox"/> At an Event <input type="checkbox"/> eSplash newsletter <input type="checkbox"/> Utility Bill <input type="checkbox"/> Neighborhood Assoc. <input type="checkbox"/> Newsletter <input type="checkbox"/> City Website <input type="checkbox"/> A Mailing <input type="checkbox"/> City Employee <input type="checkbox"/> Other (Please specify: _____) <input type="checkbox"/> Social Media (i.e., Nextdoor, Facebook, Twitter, etc.)	

LOCATION INFORMATION
St. Petersburg Water Utility Account Number:
Building Type: <input type="checkbox"/> Single Family <input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial
Does Your Water Utility Account Serve More Than One Location? <input type="checkbox"/> No <input type="checkbox"/> Yes – If Yes, How Many? _____
Has your sprinkler system been evaluated before through this Program? <input type="checkbox"/> I don't know <input type="checkbox"/> No <input type="checkbox"/> Yes - IF YES, WHEN: <input type="checkbox"/> Before 2013 <input type="checkbox"/> After 2013

LANDSCAPE INFORMATION	
What is the estimated size of your property: <input type="checkbox"/> 7,500 square feet or less (1/8 acre) <input type="checkbox"/> 7,501 to 12,500 sq. ft. (1/4 acre) <input type="checkbox"/> 12,501 to 30,000 sq. ft. (1/2 acre) <input type="checkbox"/> 30,001 to 50,000 sq. ft. (1 acre) <input type="checkbox"/> I don't know	Approximately how much of your property is Lawn? <input type="checkbox"/> No Lawn <input type="checkbox"/> I don't know <input type="checkbox"/> Less than 1/4 (25%) <input type="checkbox"/> Between 1/4 and 1/2 (25 to 50%) <input type="checkbox"/> Between 1/2 and 3/4 (50 to 75%) <input type="checkbox"/> Over 3/4 (75%)

SPRINKLER SYSTEM INFORMATION
What is the Water Source for your In-Ground Sprinkler System: <input type="checkbox"/> Potable (City) Water <input type="checkbox"/> Reclaimed Water <input type="checkbox"/> Both City and Well Water <input type="checkbox"/> Privately Owned Well <input type="checkbox"/> Lake or Pond <input type="checkbox"/> I don't know

How is your LAWN watered? <input type="checkbox"/> Rainfall ONLY <input type="checkbox"/> Permanent in-ground sprinkler system <input type="checkbox"/> Drip/micro-irrigation, soaker hose or other low volume <input type="checkbox"/> Garden hose with sprinkler or hand-held nozzle	How are your LANDSCAPE BEDS watered? <input type="checkbox"/> Rainfall ONLY <input type="checkbox"/> Permanent in-ground sprinkler system <input type="checkbox"/> Drip/micro-irrigation, soaker hose or other low volume <input type="checkbox"/> Garden hose with sprinkler or hand-held nozzle
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Do you have an automatic sprinkler system with a time clock? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a rain sensor installed on your automatic sprinkler system? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know
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How many zones/stations are on your sprinkler system time clock? <input type="checkbox"/> Less than 4 zones <input type="checkbox"/> 4 to 6 zones <input type="checkbox"/> 7 to 8 zones <input type="checkbox"/> 9 to 12 zones <input type="checkbox"/> More than 12 (Please specify _____) <input type="checkbox"/> I don't know



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St. Petersburg Sensible Sprinkling Program Phase 8 - Guidelines

- This program only applies to St. Petersburg water customers utilizing reclaimed, private well, or potable (city) water for their operable in-ground irrigation/sprinkler system.
- Properties evaluated as part of the program during or after 2013 cannot be evaluated during this Phase.
- Implementing the suggested modifications provided as a result of an evaluation is the responsibility of the property owner or manager.

Simple Steps to Participate

1. Complete all items on this application form (both sides), sign and return to the address below.
St. Petersburg Sensible Sprinkling Program
1650 Third Avenue North, St. Petersburg, FL 33713

NEW! As an alternative to mailing, both sides of a completed and signed application can be scanned and emailed to: SensibleSprinkling@stpete.org

2. The Irrigation Specialist will contact you to arrange an appointment to perform an evaluation of your sprinkler system. You will need to provide access to your property and your sprinkler system's time clock.

As a Participant in the Sensible Sprinkling Program, you will Receive At No Cost:

- Rain sensor installation if no sensor is currently installed or if the existing sensor is inoperable.
- A sprinkler system efficiency report based on an evaluation of your irrigation system.
- Educational materials on indoor and outdoor water conservation.

Program Terms and Conditions – What is Expected of Participants

- √ The irrigation system must be operable and have water supply available for use.
- √ The application form must be completed fully.
- √ The Irrigation Specialist shall be granted access to the property, including the area where the time clock is kept. The participant or an adult representative must be present during the evaluation.
- √ The participant must agree to installation of a rain sensor or replacement of an inoperable rain sensor.
- √ Irrigation Specialists will evaluate the system but are not authorized to make recommended modifications.
- √ Any costs incurred in making recommended modifications will be at the participant's expense.
- √ The participant shall agree to participate in a follow-up evaluation regarding the suggested sprinkler system modifications within six to twelve months after the evaluation.
- √ The participant agrees to complete and return a satisfaction survey after the evaluation.

By signing below, I agree that I have read and will abide by the program Guidelines as outlined herein. In addition, I certify that my entire irrigation system is in good operating condition. In the event my irrigation system is inoperable when the Irrigation Specialist conducts the evaluation, I agree to reimburse the city the sum of \$50.00 and understand that I will be ineligible to receive the requested evaluation.

Signature

Name (Please Print)

Date

Title of Person Signing, *if Multi-family or Commercial*

If you have further questions, please call 727-551-3177

Southwest Florida
Water Management District

WATERMATTERS.ORG · 1-800-423-1476

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