Water Efficient Irrigation Ordinance

Tier 2 Certificate of Completion

Applicant Information:

Applicant Name:	
Phone:	
Mailing Address:	
Zip Code:	
Project Name:	
SFPUC Account Number:	
Landscape Project Site Address:	

Property Owner Information:

Property Owner Name:	
Company:	
Title:	
Phone:	
Mailing Adress:	
Zip Code:	

Landscape Professional Information (if applicable):

Landscape Professional Name:	
Company:	
Phone:	
Mailing Address:	
Zip Code:	
License or Certificate Name and Number:	
License Expiration Date:	

Your Signature:

I/we certify that based upon periodic site observations, the work has been substantially completed in accordance with the Water Efficient Irrigation Ordinance and its companion Rules and Regulations and that the landscape planting and irrigation installation conform with the requirements and specifications of the approved Tier 2 Application.

Signature of landscape contractor or irrigation system/landscape designer

Date

Please attach the following to your Certificate of Landscape Completion:

☐ Irrigation Schedule

☐ Schedule of Landscape and Irrigation Maintenance

☐ Landscape Irrigation Audit Report

Return the Tier 2 Certificate of Completion

Email to landscape@sfwater.org

Or by mail to: SFPUC - Water Conservation Section

525 Golden Gate Ave, 10th Floor

San Francisco, CA 94102

SFPUC Staff Evaluation:

☐ Approved ☐ Not Approved	
Case ID Number:	

Approval Signature

Date