



IRRIGATION RETROFIT INSTALLATION FORM

FIRST NAME: _____ LAST NAME: _____ ACCOUNT: _____

SITE ADDRESS: _____ CITY: _____ ZIP CODE: _____

PHONE NO.: _____ EMAIL: _____

OWN RENT OWNER'S NAME: _____ PHONE NO.: _____

Liability Waiver & Signature

I (property owner or representative name) _____ certify that the controller(s) and/or nozzle(s) have been installed and are working correctly

_____ DATE _____ SIGNATURE _____

Installation Information

DATE OF INSTALLATION: _____ INSTALLER NAME: _____

Nozzles

NUMBER OF NOZZLES INSTALLED: _____

Drip

SQUARE FEET OF DRIP INSTALLED: _____

Sprinkler Caps

NUMBER OF SPRINKLERS CAPPED: _____

Notes / Reason for Denial (if applicable)

TOTAL NUMBER OF HOURS ONSITE: _____

Nozzles and drip are installed by WaterWise Consulting. WaterWise Consulting is a fully licensed Corporation, bonded C-27 Landscape Contractor (#978574) licensed by the State of California. WaterWise provides a 30 day warranty. Please call the number listed below if you have any questions.

Irrigation Retrofit Program Customer Service:

1-888-987-9473