



Agri-Center of The World

PUBLIC WORKS/ WATER DIVISION

WATER CONSERVATION EXEMPTION REQUEST FORM

DATE: _____

NAME: _____

ADDRESS: _____

PHONE: _____

FOR OFFICE USE ONLY:

APPROVED BY: _____

DENIED BY: _____

VALID DATES:

Address of Requesting Exemption: _____

Type of Exemption Requested: _____

NO WATERING IN NOVEMBER, DECEMBER, JANUARY, OR FEBRUARY

Reason for Exemption: _____

Signature of Applicant: _____

Please return completed form to:

City of Tulare
Water Division
3981 S "K" Street
Tulare, CA. 93274