



# City of Hamilton

## IRRIGATION PERMIT APPLICATION

**\$30.00**

**OFFICE USE ONLY**

**PERMIT #** IRR Site Plan & Backflow Spec Sheet Attached: \_\_\_\_\_ Date Closed: \_\_\_\_\_

Application Taken By: \_\_\_\_\_

**Permit Approved By:** \_\_\_\_\_

Land Hansen, Building Inspector Date Bonded: \_\_\_\_\_ No \_\_\_\_\_ Yes

On File City of Hamilton Building Department: **Contractor License #** \_\_\_\_\_ **Expiration date:** \_\_\_\_\_

**Hamilton Business License #** \_\_\_\_\_ **Expiration date:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Description of work to be done:** \_\_\_\_\_

**Proposed starting date:** \_\_\_\_\_

**Type of Building:** 1 or 2 Family Multi-Family Commercial

**Type of Project:** New Construction Replacement/Repair Addition

**GPM in each Zone:** Zone 1 Zone 2 Zone 3 Zone 4

**Operating Pressure (PSI):** \_\_\_\_\_ **Size of Water Service Line** \_\_\_\_\_

**Distance from Public Right of Way** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_ **Company:** \_\_\_\_\_

Home or Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_ **Company:** \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Website: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Contractor's Name/Company:** \_\_\_\_\_ **Contact's Name:** \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Web site: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**On Site Contact's Name:** \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**PERMITS MUST BE OBTAINED BEFORE WORK BEGINS**

**APPLICATION VOID IF WORK IS NOT STARTED WITHIN 6-MONTHS AFTER PERMIT ISSUANCE**

All sprinkler systems automated or otherwise including frostless yard hydrants shall be connected to the water system in a manner so that all water used shall pass through a city water meter.

**Application Date:** \_\_\_\_\_ **Applicant's Signature:** \_\_\_\_\_