



# APPLICATION FOR CERTIFICATION OF WATER MANAGED SITES

E 1665 (R2023-09)  
Under Bylaw 40M2006 - Water Utility Bylaw

Site <input type="checkbox"/> Park <input type="checkbox"/> Commercial / Industrial <input type="checkbox"/> Golf Course <input type="checkbox"/> Residential <input type="checkbox"/> Other		Application Date (YYYY-MM-DD)
Name of Registered Owner of Property		
Address of Property		
Name of Applicant		Phone Number of Applicant
ENMAX Account Number	Name on ENMAX Account	Meter Number(s)
Controller on Irrigation System <input type="checkbox"/> Yes <input type="checkbox"/> No	Controller Manufacturer	Controller Model Number
Rain Switch or Weather Station Installed <input type="checkbox"/> Yes <input type="checkbox"/> No	Rain Switch or Weather Station Manufacturer	Rain Switch or Weather Station Model Number
Flow Sensor with Totalizer Installed <input type="checkbox"/> Yes <input type="checkbox"/> No	Flow Sensor Manufacturer	Flow Sensor Model Number
Master Valve Installed <input type="checkbox"/> Yes <input type="checkbox"/> No	Irrigation Meter Installed <input type="checkbox"/> Yes <input type="checkbox"/> No	Meter Number
Cross Connection Control Assembly Installed and Tested <input type="checkbox"/> Yes <input type="checkbox"/> No	Serial Number	Date Last Tested
	Serial Number	Date Last Tested
	Serial Number	Date Last Tested

### Certified Landscape Irrigation Auditor

Name of Auditor	Date of Audit (YYYY-MM-DD)
Name of Auditor's Firm	
Address of Firm	

Submit this completed form along with Certified Landscape Auditor's report and as-built drawings or schematics of your in-ground irrigation system to:

Citizen Program Team  
 City of Calgary, Water Services, #433  
 PO Box 2100, Station M  
 Calgary, AB T2P 2M5

The personal information on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act, Section 33(c) and used solely for the administration and evaluation of the Water Managed Sites Program. If you have any questions about the collection and use of this information, please contact 311.

### For Office Use Only

Application Approved for <input type="checkbox"/> Tier One Certification <input type="checkbox"/> Tier Two Certification <input type="checkbox"/> Site Not Certified	Application reviewed by	Date for Next Audit (YYYY-MM-DD)
<input type="checkbox"/> Audit documentation submitted <input type="checkbox"/> Irrigation System Plan/Drawing submitted		