



# IRVINE RANCH WATER DISTRICT

15600 Sand Canyon Ave., P.O. Box 5700, Irvine, CA 92619-7000 (949) 453-5300

## PROJECT CHECKLIST FORM FOR RECYCLED WATER AND CONSERVATION

### PROJECT INFORMATION

Project Name \_\_\_\_\_ Company Name \_\_\_\_\_  
 Project Address \_\_\_\_\_ Contact Phone \_\_\_\_\_  
 Tract # \_\_\_\_\_ Email \_\_\_\_\_  
 Developer Name \_\_\_\_\_ Engineer Name \_\_\_\_\_  
 Phone ( ) - \_\_\_\_\_ Phone ( ) - \_\_\_\_\_  
 Email \_\_\_\_\_ Email \_\_\_\_\_  
 IRWD Off-site Ref. Code \_\_\_\_\_ Atlas page \_\_\_\_\_ Is recycled water available? ( Y / N )  
 IRWD On-site Ref. Code \_\_\_\_\_ Check each that apply:  Residential  Commercial  Industrial  
 Project Description: \_\_\_\_\_

### BUILDING INFORMATION

Building Total Sq. Ft. \_\_\_\_\_ No. of floors \_\_\_\_\_ No. of floor drains \_\_\_\_\_  
 Occupancy (emp. + cust.) \_\_\_\_\_ New building or remodel \_\_\_\_\_  
 Landscape Sq. Ft. (if mixed use) \_\_\_\_\_ Turf % Non-turf % Cooling Tower ( Y / N )

### ESTIMATED WATER DEMANDS

Acre-Foot/Year		Acre-Foot/Year	
No. of toilets	gal./flush	No. of urinals	gal./flush
Domestic Uses		Water features	
Industrial Uses		Other Uses (specify)	
Irrigation Uses			
1 AF = 325,851 gallons			<b>Total Estimated Demand</b>

### COOLING TOWER INFORMATION

What is the projected load on the cooling tower? \_\_\_\_\_  
 What are the planned hours of operation? Winter: \_\_\_\_\_ Summer: \_\_\_\_\_  
 What is the maximum gallons per minute for the cooling tower? \_\_\_\_\_  
 What is the maximum annual water usage for the cooling tower? \_\_\_\_\_  
 Is this cooling tower located on the rooftop or in a central plant? \_\_\_\_\_  
 Will there be a conductivity controller? (type or model) \_\_\_\_\_  
 Will there be a pH controller? (type or model) \_\_\_\_\_  
 Will there be an on-site building engineer? ( Y / N ) \_\_\_\_\_  
 If so: Name \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_  
 Water Treatment Company \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_

\_\_\_\_\_  
 ( ) - \_\_\_\_\_  
**Building Owner Representative** Phone Date

**For IRWD use only:** Was customer given dual-plumbed building requirements? ( Y / N )

IRWD Representative \_\_\_\_\_ Date \_\_\_\_\_