## VARIANCE REQUEST FOR WATER BUDGET INCREASE



Service address:	
The purpose of this form is to request a variance. A variance provides a water budget greater than the standard amount IRWD uses type of home. If you require a variance based on the criteria below, please complete and return this form. Variances are subject to p review by IRWD.	
I request a variance for the following reason(s):	
ADDITIONAL PEOPLE IN OUR HOME	

- Detached home with more than 4 permanent residents:
- or  $\Box$  Condo attached/detached with more than 3 permanent residents:

Total number in household \_\_\_\_\_

Account #:

or  $\Box$  Apartment with more than 2 permanent residents:

Attach proof of permanent residency for EACH PERSON in the household. Proof may be children's birth certificates, school records, blank checks with preprinted name and address, income tax returns, drivers license, lease agreements, etc.

**Proof must be preprinted with current service address.** Increased budgets for additional occupants must be renewed annually. Forms will be mailed to you for this purpose.

## □ ADDITIONAL LANDSCAPE AREA

Account holder name:

Detached home with more than 1,300 square feet:

or Condo attached/detached with more than 435 square feet:

Total square feet \_\_\_\_\_ (soft landscape only)

*Submit landscape drawings or a sketch showing total square feet of the landscape.* Include the surface area of your pool and spa. Do not include the hardscape area (i.e. driveways, patios) as part of the total landscape. Record dimensions in feet and the total area in square feet.

- $\succ$  Is part of the landscape owned by the association but your responsibility to water for fire control?  $\Box$  Yes  $\Box$  No
- □ **MEDICAL NEEDS** > Provide a doctor's note stating condition requires additional water use.
- □ LICENSED CARE FACILITY (in a residential dwelling unit) > Submit a copy of business license.
- □ HORSES/LIVESTOCK > Provide a list of the quantity of each type of livestock that requires additional water. A site visit may be required to verify.
- □ **OTHER** > There may be other instances where an increased budget is appropriate. Please contact Customer Service at **CustomerService@IRWD.com** or **949-453-5300** to discuss your needs.

Variances are effective the day the request is received by IRWD.

I affirm that the information herein, including attachments, is complete and accurate. I understand that all variances are subject to change based on future water efficiency requirements.

Signature	Phone	Date
How to submit this form and attachments:		
Email – CustomerService@IRWD.com Use "Budget Variance" as your subject line	Mail to – Irvine Ranch Water District P.O. Box 57000 Irvine, CA, 92619-7000 Attn: Customer Service	
District Use Only		
Approved Denied Signature	Date	