Request for Increased Water Budget

Name: ___________________________________   Account#: ________________________
Service Address: ___________________________   Telephone#: ______________________

This form is to request a water budget greater than the standard amount CVWD uses for your home. If you believe you need an increased water budget, based on the criteria listed below, please complete and return this form. Requests may be submitted for any of the following reasons.

I request an increased water budget for the following reason(s):

1. ☐ Additional (if more than four) people in our home
   Total number of people in household ________.

2. ☐ Additional landscaped area:
   Total lot size (square feet) ______________. Total landscaped area (square feet) _______________. Submit a landscape drawing or a sketch showing total lot size and landscaped area in square feet. Include the surface area of pool and spa, but do not include hardscape area (i.e. driveways, patios) as part of the landscape total. You may use the back of this form for the sketch. Show dimensions in feet and the total area in square feet.

3. ☐ Other
   Please explain your circumstances in detail and the amount of additional water required.
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

I have completed this form and affirm that the information, including attachments, is complete and accurate.

_________________________________                    ______________________
Signature                                                                Date

Please return to:
CVWD
Water Management Dept.
P.O Box 1058
Coachella, Ca. 92236
Phone: (760) 391-9600
Fax: (760) 391-9638

District Use Only

Staff: ______________________   Date received: ______________________

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