

APPENDIX D
CONSTRUCTION WATER PERMIT – RECYCLED WATER

Effective Date: July 1, _____ - June 30, _____
This permit must be available by for review by County staff at all times in the water carrying vehicle.
Permit No. _____, Fees Paid \$ _____
Approved _____

Water Carrier Information	_____ Recycled Water Carrier Name _____ Address _____ City State Zip _____ Office Phone Mobile Phone
Vehicle Description	_____ Vehicle Type: _____ Make and Model Description
Construction Water Supervisor	_____ Name _____ Address _____ City State Zip
Site/Use Location	Site Location(s)/address(es) of Recycled Water Use: _____ _____ _____
Certification	I hereby certify under penalty of perjury that the information provided on this application, and in any attachment, is true and accurate to the best of my knowledge and that I have read and agree to abide by all applicable procedures for use of recycled water. _____ Signature of Water Carrier Title Date