Irrigation Permit Application
(With Backflow device)

Apply online at arlingtonpermits.com
(Do not fax, mail or email application)

Please print clearly:

Applicant’s Name*: _______________________________________________________________

Applicant’s Mailing Address: ________________________________________________________
City: _____________________________ State: _________________ Zip Code: ______________

Phone #: (____) ________ Fax #: (____) ________ Email**:______________________________

*A legible copy of a current government photo ID is required to be submitted by the applicant.
**Plan review comments will be delivered to Email provided above (Please verify email).

Project Address:________________________________________ Suite:

Brief description of work: ______________________________________________________________________________

Select a property category. Please check only one:

☐ Residential, 1- & 2-family    ☐ Commercial

Select a category. Please check only one:

☐ New Potable Water Irrigation System (standard system)
☐ Addition of Potable Water Irrigation Head(s) and/or Zone(s)

☐ New Reclaimed Water Irrigation System
☐ Addition of Reclaimed Water Irrigation Head(s) and/or Zone(s)

☐ Conversion of Reclaimed/Potable Water Irrigation System

For all applications, complete the following:

- What is the design water pressure in "psig?" ___________ psig
- Are you installing a new Water Tap at the City’s main? ___ Yes ___ No (If yes, then complete an Arlington Water Utilities Account Application at http://www.arlington-tx.gov/cdp/building-zoning-forms/)
- Are you installing a pressure regulating device? ___ Yes ___ No
- Will the Irrigation work be performed by the homeowner? ___ Yes ___ No
- Are you installing or replacing the Backflow Prevention Device Outdoors? ___ Yes ___ No
- Number of Backflow Prevention Device(s) to be installed outdoors: __________
- Type of backflow prevention device being installed (select one only):
  - ☐ Atmospheric Vacuum Breaker
  - ☐ Pressure Vacuum Breaker
  - ☐ Double Check Backflow Preventer
  - ☐ Reduced Pressure Backflow Preventer

- List the number of irrigation zone valves: __________
- List the number of irrigation heads: __________
- What is the construction valuation-declared for the work? $___________________

For Residential, 1- & 2-family properties, is the new irrigation system or addition to be installed by the homeowner?
___ Yes ___ No (If yes, homeowner must complete a Homeowner Registration and provide plans)

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local ordinances regulating construction, the performance of construction or the use of any land or buildings.

Print Name of Permit Applicant____________________________________________________________ Date __________

Signature of Permit Applicant ________________________________________________________________

Applicant is: ___ Contractor, ___ Homeowner or ___ Authorized Agent