



Agri-Center Of The World

PUBLIC WORKS / WATER DIVISION

WATER CONSERVATION EXEMPTION REQUEST FORM

DATE: _____

NAME: _____

ADDRESS: _____

PHONE: _____

Address of Requested Exemption: _____

Type of Exemption Requested: _____

Reason for Exemption: _____

Signature of Applicant: _____

Please return completed form to: **City of Tulare
Water Division
3981 South "K" Street
Tulare, CA 93274**

FOR OFFICE USE ONLY:

APPROVED BY: _____

DENIED BY: _____

VALID DATES:
