



Irrigation / Potable Water Usage Permit

Date Issued: _____

Name: _____

Address: _____

Phone Number: _____

Reason for Permit Request: _____

Ordinance 13.02.070 use restrictions; no watering for more than (1) one hour without relocation is deemed to be excessive and wasteful.

Ordinance 13.04.410; watering with domestic water for the months of May through September is forbidden.

Permit is good for only (3) three weeks, all watering restrictions apply.

Signature of Applicant

Town of Silt Representative Signature