



## San Francisco Water Efficient Irrigation Ordinance Tier 2 Certificate of Completion

Applicant Name:	Phone:	Case ID (by SFPUC staff):	
Mailing Address:		Email Address:	
Landscape Project Site Address:	Block #:	Lot #:	SFPUC Account #:

Responsible Landscape Professional:*	Company (if applicable):	Phone Number:
Mailing Address:		Email Address:
Landscape Professional License or Certificate Name & Number:		Expiration Date:

*\*Signer of the landscape design plan, signer of the irrigation plan, or a licensed landscape contractor.*

“I/we certify that based upon periodic site observations, the work has been substantially completed in accordance with the Water Efficient Irrigation Ordinance and its companion Rules and Regulations and that the landscape planting and irrigation installation conform with the requirements and specifications of the approved Tier 2 Landscape Documentation Package.”

---

Responsible Landscape Professional’s Signature Date

**Attach the following to your Certificate of Landscape Completion:**

- Irrigation Schedule (unless submitted on irrigation design plan)
- Landscape and Irrigation Maintenance Schedule
- Landscape Irrigation Audit Report

**Return to:**  
**San Francisco Public Utilities Commission**  
**Water Conservation**  
**1145 Market Street, 4<sup>th</sup> Floor**  
**San Francisco, CA 94103**  
**Email: [landscape@sfgwater.org](mailto:landscape@sfgwater.org)**  
**Fax: (415) 551-4731**

<p><b>SFPUC Staff Evaluation</b></p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Not Approved</p>	<p><b>Staff Comments:</b></p> <hr/> <p>Signature <span style="float: right;">Date</span></p>
--	--