

Irrigation Plan Information Form

INSTALLING COMPANY INFO:

Company Name _____

Phone (____) _____ Fax (____) _____ Email _____

Contact Person _____ Cell (____) _____

JOB INFO:

Owner _____ Phone (____) _____ Subdivision _____

Address: _____ City _____ Zip _____

Water Provider/City _____ Meter Size _____ Static PSI _____

Service Line to Meter: Type _____ Size _____ Length _____

Survey/Plot Plan: Y / N

Sun/Shade Areas Identified on Plan: Y / N

Elevation changes Identified on Plan: Y / N

All Flatwork/Patios Identified on Plan: Y / N

All Beds Identified on Plan: Y / N

Are there Conduits in Driveway: Y / Nin Sidewalks: Y / N

Rain Sensor Location: on House / on Fence Left Side / Right Side

Controller Location Marked on Plan: Y / N

NORTH/Direction marked on Plan: Y / N

Protected Trees on Property (CRZ): Y / N

Plan Size Requested: 8 1/2 x 11 or Other _____

Scale Desired: _____

COMPONENT PREFERENCE:

Spray Head - Sod _____ Spray Head - Shrubs _____

Rotor - Long Range _____ Rotor - Short Range _____

Control Valve _____ Size _____

Backflow Preventer -Type _____ Size _____

Sensor _____ Controller _____

Pipe Size - Main Line _____ Lateral Lines _____

Return this form with Plot Plan to Kevin Farmer's email: kevin@farmersnursery.com or fax (512)366-9920
Please provide as much information as possible. Any questions - call (512)748-3111.