

For Office Use Only

Acct # _____

A/R-Clear _____

DELANO-EARLIMART IRRIGATION DISTRICT
MUNICIPAL AND INDUSTRIAL
2021 WATER APPLICATION

APPLICATION MUST BE RETURNED BY FEBRUARY 19, 2021

BILLING INFORMATION: *Please use the name and address you wish to be shown on your statement.*

Name: _____ **Address:** _____

City/State: _____ **Zip Code:** _____

CONTACT INFORMATION: *List contact information for all those you want to receive important information during the water year. All water supply information is provided exclusively by email.*

Name: _____ **Email address:** _____ **Phone number:** _____

1. _____
2. _____
3. _____
4. _____
5. _____

PARCEL INFORMATION: Please identify all parcels that will receive District water. Use Assessor's Parcel Numbers for each parcel.

Assessor's Parcel Number	Meter number	Water to be used for:	Irrigation method	Acres

Total Acres for this Application: _____

The undersigned hereby makes application for water from the Delano-Earlimart Irrigation District based upon the information provided herein. I certify that I have read the 2021 M&I Water Policy as adopted by the Board of Directors and agree to be bound by it:

Print Name: _____ **Signature:** _____