

COMMUNITY DEVELOPMENT DEPARTMENT

PLANNING DIVISION

500 Castro Street, P.O. Box 7540 Mountain View, CA 94039-7540 650-903-6306 | <u>MountainView.gov</u>

CERTIFICATION OF LANDSCAPE/IRRIGATION INSTALLATION

Applicant or Authorized Agent Name:		Phone:		Email:	
Project Address:					
Parameter	Requirements				Compliance
Landscape	Conforms with the Landscape Design Plan (from building permit)			Yes	
Irrigation System	Conforms with the Irrigation Design Plan (from building permit)			Yes	
	Performed system test and distribution uniformity				Yes
	Performed system tune-up to reduce overspray and runoff			Yes	
	Prepared recommended irrigation schedule			Yes	
	ed upon periodic site obse on Design Plans and comp				een installed as specified in the andscaping Regulations.
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Signature of Applicant or Authorized Agent Date				Date	