

For Office Use Only

Acct # _____

A/R-Clear _____

DELANO-EARLIMART IRRIGATION DISTRICT
MUNICIPAL AND INDUSTRIAL
2022 WATER APPLICATION

APPLICATION MUST BE RETURNED BY FEBRUARY 18, 2022

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.

Paperless billing
recipient (Select
one by marking
"X")

Name: Email address: "X" 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 2022 M&I Water Policy as adopted by the Board of Directors and agree to be bound by it:

Print Name: _____ Authorized Signature: _____