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REQUESTS FOR EXEMPTIONS AND VARIANCES

DURING DROUGHT RESTRICTION STAGE II

Instructions: Please complete the following application and submit via email (info@ncwcid4.org), mail or fax (contact information above). All applications will be considered based on particular circumstances and whether enforcing District drought restrictions will cause you unnecessary hardship. Should you be granted a variance or exemption, your permit will be mailed to you with instructions regarding posting in public view.

1. Name of Organization/Business _____
2. Contact Person _____ Title/Position _____
3. Mailing Address w/city and zip _____
4. Phone _____ Cell Phone _____ E-Mail _____
5. Site Address of Requested Exemption/Variance: _____
6. Purpose of water use related to requested exemption/variance (check all that apply)
 NEW PLANTING/SOD FIRE HYDRANT USE DUST CONTROL
 OTHER _____
7. Specific restriction affecting water use: _____
8. Reason requesting exemption/variance (*Please explain in detail how the specific provision of the drought restrictions will cause unnecessary hardship, damage, or harm, or be a threat to health and safety. Attach additional sheets if necessary*): _____

9. Detailed Exemption/Variance Request (*Please explain what you are requesting, including completing the table below*):

Complete the following information:

Date(s) requested for Water Use _____ Time of Day for Water Use _____

Duration (in hours/minutes) of each Water Use _____ Day(s) of Week for Water Use _____

Estimated Usage in Gallons per Application _____ Estimated Total Gallons Used _____

Source of Water (tap, hydrant, etc) _____

Method of Application (irrigation system, hand-held hose, etc) _____

10. Conservation Measures to be Taken (*Please explain what measures you plan to take to reduce water conservation or improve efficiency during the drought*):

11. Other pertinent information: _____

Signature of Contact Person _____ **Date** _____

(For Office Use Only)

____ **Permit Granted As Requested**

____ **Permit Granted with Following Revision(s)** _____

____ **Permit Denied. Reason(s) why:** _____

____ **Permit Expiration Date** _____

Approved by _____ **Title:** _____

Signature: _____ **Date:** _____