MWDOC Turf Replacement Rebate Program – PRE-Inspection Form

Application #: _____ Retail Water Agency: _____ Contact Name: _____

Project Address: _____

• Proposed Turfgrass Sq Ft: _____ • Ineligible Area Sq Ft: _____

• **Pre-Inspection Rebate Eligible Area Sq Ft: _____**

• **Existing Irrigation** *(check all that apply)*:

☐ Overhead Spray ☐ HE Nozzles ☐ Rotors ☐ Drip
☐ Bubblers ☐ Microspray ☐ None ☐ Handwater
☐ Other (explain): _____

**If there is a mix of high efficiency and standard, please indicate the locations of different types in the measurements*

• **Recycled Water Site?**

☐ YES ☐ NO ☐ MIX ☐ UNSURE

• **Additional Comments:**

_____

_____

_____

• **If present, Site Owner/Designee Name**: _____

Site Owner/Designee Signature: _____

I certify that the information provided is verified in accordance with the guidelines provided in the Agreement by our Staff who has no conflict of interest in the verification.

Evaluator:

Name: _____ Signature: _____Date: _____

Authorized Representative:

Name: _____ Signature: _____ Date: _____