



City of Fort Bragg
416 N. Franklin Street
Fort Bragg, CA 95437
(707) 961-2823

REQUEST FOR SHORT-TERM RESTRICTED WATER USE

Business/Resident Name: _____

Owner/Manager: _____

Mailing Address: _____

Contact Phone Number: _____

E-mail Address: _____

Reason for requesting exemption (please include a description of water use and an estimate of total daily and/or weekly use):

By submitting this request, I agree to limit all water use to beneficial uses only and to take all necessary steps to conserve water, including but not limited to installation of automatic shut-off devices on all equipment, hoses and other apparatus, limiting water use to the amount necessary for health and safety standards, and employing best industry practices. I understand and accept this exemption is subject to immediate revocation by the City upon declaration of a Stage 3 Water Emergency, Stage 4 Water Crisis or a Stage 5 Critical Water Shortage.

Signature

Date

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(For City Use Only)

Approved

Denied

Signature

Date