

The Woodlands Water Agency Variance Request

Requested start date: _____

Name of resident/property owner/property management/: _____

Property Address: _____

Account Holder Address: _____

Primary Contact: _____ Phone: _____

Email: _____

Property Name (if applicable): _____ Organization: _____

Property Manager/Contact: _____

Reason for variance request: _____

Specific Policy Modifications Requested: _____

I acknowledge that the above information is correct. I understand that this variance request does not exempt the applicant or the property owner/manager from complying with the provisions of The Woodlands Defined Irrigation Schedule Policy. I further understand and acknowledge that my variance request may be denied or approved in a modified form.

Signature _____ Title _____ Date _____

Print Name _____ Title _____

Full compliance with The Woodlands Defined Irrigation Schedule Policy is required until specific approval of a variance is **approved** in writing. If a variance is approved, the account holder/property manager/owner is responsible for complying with all provisions of The Woodlands Defined Irrigation Schedule policy, as modified by the approved variance, throughout the terms of the variance.

EMAIL OR DELIVER COMPLETED VARIANCE FORM TO:

information@woodlandswater.org
Woodlands Water
2455 Lake Robbins
The Woodlands, TX 77380

Woodlands Water Use Only

Site inspection Date _____

Specific Policy Modifications Approved _____

Variance GRANTED from _____ to _____ Variance Denied _____
(Date) (Date)