



Application and Sizing Form for Dedicated Irrigation Meter

All landowners relevant to this application must be included as applicants of this submittal. By signing this application, applicant/property owner attests that they are aware of this application and agree to its content.

The Applicant/Owner shall submit this Application and Sizing Form along with one set of drawings of the proposed irrigation to Customer Service, 846 Forest Road, Vail, CO 81657. Questions? Call 970-477-5451. Forms with drawing submittals may also be sent via email to customerservice@erwsd.org.

Sizing of water meters shall be based upon the maximum flow rate for the system, in the current approved version of the International Plumbing Code, approved by Eagle River Water & Sanitation District.

Customer Information

Owner/Applicant Name _____ **Phone #** _____

Service Address _____

Development Name _____

Irrigation System Demand Information

Determine maximum flow rate (GPM) by identifying which zones will be operating together; Please report the zone(s) which illustrate the highest system demand.

Does this data represent the Full Build-Out demand:
 Yes No *(If No, updated form will be required upon expansion)*

Zone ID **Max Flow GPM** **Zone Type**

Total Area to be Irrigated _____ ft²
System Design Pressure _____ psi
Static Pressure (Main) _____ psi
Backflow Pressure Loss (BPL) _____ psi
Total Development Length _____ ft

Maximum System Demand: _____ GPM

Status: Existing Proposed

Proposed Service Line Size: _____ Inch

Peak Pumping Capacity _____ GPM

Booster Pump: Yes No

(If Yes, please attach manufacturer's pump curve information and max GPM)

Requested Meter Size to be Installed = _____ Inch

The Approval of Water Meter size will be prepared exclusively on the basis of the attached information submitted by the Applicant/Owner. Applicant/Owner hereby agrees to indemnify Eagle River Water & Sanitation District from any and all claims, damages, losses and/or costs arising out of, or related to any mis-information, change or alteration of any information. Authorized submission to Eagle River Water & Sanitation District of the provided information herein indicates that Applicant/Owner accepts the above conditions.

Applicant/Owner: _____ Date: _____

Application Received by: _____ **Review Date:** _____

Approved Meter Size: _____

Comments: _____

