



**South Tahoe Public Utility District
Turf Buy-Back Program 2009
Application**

Date _____ Vendor # _____

Name _____

Mailing Address _____

City, State, Zip _____

Property Address _____

Phone _____ Fax/Email _____

Area to be converted _____

How did you hear about this program?

Web-site ___ Tribune ___ Radio ___ Mtn. News ___ Waterbill ___ Other ___

DISTRICT USE

APN# _____ Tracking # _____

Pre-Conversion Site Visit _____ Before Picture _____

Contract Expiration _____

Estimated Area _____ square ft Estimated Rebate \$ _____

Old Sprinkler G.P.M. _____ #days/week _____ #min/day _____

Final Inspection _____ After Picture _____

Replaced Sprinkler G.P.H. _____ #days/wk _____ #min/day _____

ACCOUNTING

District Approval _____ Date _____ Amt _____

2038-6660/WCPROG-OTHR _____ Check # _____

Prepared _____ Checked _____ Entered _____