



**CERTIFICATE OF COMPLETION –
WATER EFFICIENT LANDSCAPING REQUIREMENTS**
This certificate is filled out by the project applicant upon completion of the landscape project.

PART 1. PROJECT INFORMATION

Project Address, Location & Permit Number:

Street Address:	Permit Number:	
City:	Total Landscaped Area:	Approved Plan Date Stamp:
Work Description:		

Permit Holder Information:

Date:	Project Name:	
Name of the Permit Holder:	Title:	
Telephone Number:	Email Address:	
Company:	Street Address:	
City:	State:	Zip Code:

PART 2. FINAL INSPECTION – COMPLETION OF WORK

<p>TO BE COMPLETED BY LANDSCAPE ARCHITECT, LANDSCAPE OR IRRIGATION DESIGNER OR LICENSED LANDSCAPE CONTRACTOR: Based upon field observation and testing of the irrigation system, the landscaping and irrigation has been completed in accordance with La Cañada Flintridge Municipal Code Chapter 4.23 Water Efficient Landscaping and in conformance with the final approved landscaping and irrigation plans. The following REQUIRED documents are attached:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Soil Management report per LCFMC Section 4.23.080 <input type="checkbox"/> Irrigation scheduling per LCFMC Section 4.23.130 <input type="checkbox"/> Maintenance schedule per LCFMC Section 4.23.140 <input type="checkbox"/> Landscape Irrigation Audit Report per LCFMC Section 4.23.150 		
Company Name:	Date:	
Company Street Address:	Telephone No:	
City:	State:	Zip Code:
Title:	Email Address:	
Signature:	License Number:	



PART 3. WATER PURVEYOR ACKNOWLEDGEMENT:

This is to certify that the Notice of Completion for Water Efficient Landscaping has been received by this agency, as required by the La Cañada Flintridge Municipal Code Chapter 4.23 Water Efficient Landscaping, Section 4.23.120(B)(2).		
Name of Water Purveyor:		
Address:		
City:	State:	Zip Code:
Title:	Telephone No:	
Signature:	Date:	

PART 4. PROPERTY OWNER (OR DESIGNEE) ACKNOWLEDGEMENT:

I/we certify that I/we have received copies of all the documents within the Landscape Documentation Package and the Certificate of Completion and that it is our responsibility to see that the project is maintained in accordance with the Landscape and Irrigation Maintenance Schedule.		
Name:	Telephone No:	
	Email Address:	
Title:	Company:	
Street Address:		
City:	State:	Zip Code:
Signature:	Date:	

CITY APPROVAL

Signature: _____

Date: _____

Name: _____

Title: _____