

PONTE VECCHIO HOMEOWNERS ASSOCIATION, INC.

IRRIGATION SERVICE REQUESTS

DATE: _____

RESIDENT NAME: _____

OWNER NAME: _____

STREET ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

Please place an X indicating the IRRIGATION problem and use the diagram below.

- Broken sprinkler head**
- Broken sprinkler pipe**
- Sprinkler head missing**
- Sprinkler won't turn off**
- Sprinkler won't turn on**
- Sprinkler pointed in wrong direction**
- Other explanation**

Outside box
Represents your lot

Inside box
Represents your home

