

Smart Irrigation Controller Registration Form

Return completed form to:

Livingston Township Clerk's
Office 357 S. Livingston Avenue
Livingston, NJ 07039

For more information:

email ctesta@livingstonnj.org
or call 973-535-7951

Please print all information legibly; complete all 4 sections.

1. Water Customer Information:

First Name: _____ Last Name: _____

Street Address: _____, Livingston, NJ 07039

Phone Number: _____ Email: _____

2. Installer Information:

Company Name:
(Home Builder / Owner / Landscape Professional):

Installer's Name _____ Phone Number: _____

License # (for irrigation professionals): _____

3. Smart Controller Information:

Manufacturer: _____ Model #: _____

Number of Zones: _____ Date (of Ownership): ____ / ____ / ____

• On-Site Monitor/Sensor: Yes No • Weather Data Subscription: Yes No

Property Type (check one):

Single-Family:

HOA (common area):

Multi-Family Dwelling:

Irrigation Meter (only):

4. Terms and Conditions:

I certify that this smart controller was purchased and installed at the address listed above. I understand that the installation of an approved smart controller does not guarantee a reduction in my water bill or my water usage. I agree to display my designated yard sign visible from the street to indicate the use of a smart controller. I understand that the sign belongs to the Township and may be removed for non-compliance. The Township of Livingston may deny any application that does not meet requirements.

I certify that the above information on this application is true and correct to the best of my knowledge.

Signature: _____ **Date:** ____ / ____ / ____