Irrigation System Analysis Form

Clear Form

Inspection Date	1/1/19	Controller #/Name	1
Property Name / DBA	SAWS HQ	Controller Location	Tower 1
Meter Number	99999999	Rain Sensor	Yes
Assigned Watering Day - Sprays	(check) Mon ☑ Tue ☐ Wed ☐ Thu ☐ Fri ☐	Flow Sensor	Yes
Watering Days / Drip Bubbler	(check) Mon ☐ Tue ☐ Wed ☑ Thu ☐ Fri ☐ Sat ☐ Sun ☐	Master Valve	Yes

Zone	Peak Season Schedule		Critical Maintenance Issues					Compliance Action
	Zone Type	Total Weekly Run Time	Leak Main / Lateral / Valve	Broken Head	Overspray	High Pressure	Runoff	Repairs Made / Zone Capped
1	S	18						
2	S	18		x				Repairs Made-replaced broken head
3	S	18	x					Repairs Made-replaced section of lateral line
4	S	18						
5	R	25						
6	R	25						
7	S	18						ZONE WILL BE CONVERTED TO DRIP-WILL CONTACT SAWS FOR REBATE PRE-INSPECTION
8	D	45						
9	D	45	x					Repairs Made-section of broken drip tubing replaced
10	D	45						
11	S	18						
12	S	18						
13	S				x			ZONE WILL BE CAPPED-WILL CONTACT SAWS FOR REBATE PRE-INSPECTION
14	S							
15	S							
16	S							
17	S							
18	S							
19	S							
20	S							
	S - Spray R - Rotor MP - Multistream D - Drip B - Bubbler							

Representative Zone	Zone #	GPM	Tot. Weekly Run Time	Tot. Gallons	Number of Zones	Tot. Gal. / Zone Type	Notes
Spray	2	15	18	270	8	2,160	
Rotor	6	14	25	350	2	700	
Multi-Stream Rotor				0		0	
Drip	8	7	45	315	3	945	
Bubbler				0		0	
Peak Month Estimated Total Gallons Per Week						**3,805**	
Peak Month Estimated Total Gallons Per Month						**16,362**	