



# LANDSCAPING CERTIFICATE OF COMPLETION

This form must be filled out upon completion of a landscaping project. Submit the Certificate of Completion along with the items listed below to the Project Planner or the Building Inspector prior to final inspection.

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## PROJECT INFORMATION

Site Address:		APN:	Zoning:
Planning Project #:	Planning Project Approval Date:	Building Permit #:	

## PROPERTY OWNER(S)

Name:	
Address:	City, State, Zip:
Email:	Phone: (      )

## SUBMIT THE FOLLOWING ITEMS PRIOR TO FINAL INSPECTION

*All Projects:*

☐ Landscaping Maintenance Schedule

*Projects with NEW landscaping installations of 500 sq. ft. or more or REHABILITATED landscaping of 2,500 sq. ft. or more:*

☐ Irrigation Audit Report and Irrigation Schedule (Must be conducted and prepared by a third party certified professional)

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## CERTIFICATION

I/we hereby certify the following:

1. The landscaping project identified above has been completed in conformance to the City approved landscaping and irrigation plans and specifications;
2. The automatic irrigation controller has been set according to the approved irrigation schedule;
3. The irrigation system has been adjusted to maximize effective irrigation and minimize overspray and runoff;
4. I/we have received copies of the approved plans/drawings and all other related documents for the Project described above; and
5. It is my/our responsibility to see that the landscaping is maintained in a neat, clean and healthful condition, and in accordance with the approved Landscaping and Irrigation Plans, Irrigation Schedule and Landscaping Maintenance Schedule.

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PROPERTY OWNER SIGNATURE

DATE