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Novi Water Department
Water Restriction Exemption Form

Request for exemption to the City of Novi Ordinance, Chapter 34 Sec 34-24 Irrigation Time Constraints

Name: _____

Address: _____

Home Phone: _____ **Other:** _____

Please explain reason(s):

Requested Exemption Duration
Start Date: _____ End Date: _____

Please attach all documents relating to exemption request and mail, fax, e-mail or drop off to address below

City of Novi, Water Division
26300 Lee BeGole Drive
Novi, MI 48375
Phone: 248.735.5640
Fax: 248.735.5659
Please send e-mail requests to sroselle@cityofnovi.org (see link at the top of the page)

Water Division Office use only

Address: _____ Parcel ID # _____
Comments/Documentation:

_____

APPROVED ( ) DENIED ( )

Signature: _____ Date: _____

Title: _____

Start Date: _____ End Date: _____