

**PERMANENT SPECIAL AGRICULTURAL WATER RATE (PSAWR) PROGRAM  
ENROLLMENT FORM**

To participate in the PSAWR Program as established by the San Diego County Water Authority, and administered by Rainbow Municipal Water District, the Owner shall be required to provide the information, consent, certification and acknowledgement as indicated on this form. Failure to complete all sections and/or provide requested documentation may result in ineligibility for the PSAWR program.

**OWNER/AUTHORIZED AGENT'S BILLING INFORMATION:**

Account Number: \_\_\_\_\_  Single Meter – Agricultural Use Only  
 Owner Name: \_\_\_\_\_  Single Meter – Agricultural/Residential (share)  
 Operator/Agent (If applicable) \_\_\_\_\_  
 Service Address: \_\_\_\_\_  
 Owner's Mailing Address (If different than above) \_\_\_\_\_  
 Owner/Agent's Phone Number \_\_\_\_\_ Owner/Agent's Email \_\_\_\_\_

**SECTION 1 – QUALIFICATIONS FOR PROGRAM (Required):**

In accordance with the San Diego County Water Authority rules, Rainbow Municipal Water District and Owner acknowledge that to participate in the PSAWR Program, agricultural customers must:  
 "Grow or raise – for commercial purposes – products of an agricultural, horticultural, or floricultural nature."

**SECTION 2 – PROPERTY INFORMATION** (Required Information to be provided by Owner regarding the real property covered by the PSAWR Program for Calendar Year 2021):

Assessor's Parcel Number (APN)	Acreage of Parcel	Acreage Planted & Irrigated	Is there a residence on the Parcel	Type of crop	Number of trees
EXAMPLE...125-125-10	.....10	.....4	.....YES	.....Avocados	.....400

**SECTION 3 – VERIFICATION/PROOF OF COMMERCIAL AGRICULTURAL SALES (Required):**

Once Rainbow Municipal Water District receives the completed Enrollment Form, along with proof of the Commercial Agriculture Operation's membership in one of the four lists, we will verify that the provided backup is valid. **ONLY 1 REQUIRED):** Grower's List, Active Certified Producers, Organic Producers and Regional Board General Agricultural Order Enrollment List

**SECTION 4 – CONSENT TO PARTICIPATE (Required):**

Having been fully informed of the policies and procedures of the PSAWR Program I, < Owner/Agent's Name>, consent to participate in the PSAWR Program.

Owner/Agent's Name \_\_\_\_\_ Title \_\_\_\_\_  
 (Please Print) (Owner/Authorized Agent)

Owner/Agent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION 5 – CERTIFICATION AND ACKNOWLEDGMENT (Required):**

I hereby certify that:

- I am the owner, or authorized agent of the owner, of the above referenced property
- The information provided herein is true and correct
- Water purchased under the PSAWR Program will be used for agricultural purposes in accordance with the rules of the San Diego County Water Authority PSAWR Handbook

I hereby acknowledge that:

- Water received under the PSAWR Program is a non-firm, interruptible supply, subject to early and accelerated mandatory supply reduction, based upon water supply conditions as determined by the San Diego County Water Authority.
- Water use under the PSAWR Program is subject to periodic audit, and I agree to respond in a timely manner to requests for information and access to properties.
- Failure to provide reasonable response and access for audit will result in automatic termination of the discount.
- I will not be allowed to opt out of the PSAWR Programs during or under substantial threat of a mandatory water supply reduction provided for by the Program
- Water purchased under the Program but done so on the basis of incorrect information supplied by the applicant, or water utilized for uses other than agricultural purposes as defined by the San Diego County Water Authority, may result in the assessment by Rainbow Municipal Water District of water rates, penalties and charges as required by the San Diego County Water Authority, which I hereby agree to pay.

Owner/Agent's Name \_\_\_\_\_ Title \_\_\_\_\_  
(Please Print) (Owner/Authorized Agent)

Owner/Agent's Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>For Rainbow Municipal Water District to complete:</b>	
This property qualifies under one of the following: <input type="checkbox"/> Grower's List <input type="checkbox"/> Active Certified Producers <input type="checkbox"/> Organic Producers <input type="checkbox"/> Agricultural Order Enrollment List	<input type="checkbox"/> This property does not qualify. Note Reason:  
Backflow requirements met (IF APPLICABLE): Yes ___ No ___.	
Comments _____	