

In limited situations, Austin Water may grant a variance from the water restrictions ([City of Austin Code 6-4, Article 30](#)). All variances are issued on a case-by-case basis, and a request for a variance must be submitted using Austin Water's checklist and application. After an approved variance expires, applicants must follow the [current watering schedule](#).

Austin Water's **Tree Disease / Pest Control Variance** is for the treatment of a tree disease or to control pests.

ELIGIBILITY

- **APPLICANT:**
 - o Must be a customer of Austin Water
 - o Must not **waste water**
 - no broken/missing sprinkler heads, leaking/broken pipes, or leaking faucet
 - no water running, flowing or streaming into street, parking lot, or other surface
- **VARIANCE:**
 - o **Tree Disease**
 - must be for the treatment of a tree disease; or
 - prescribed by a licensed arborist
 - o **Pest Control**
 - must be for the treatment of pests; or
 - prescribed by a pest control professional

CHECKLIST

- Meet all eligibility requirements above
- Complete and submit the variance application
 - Send the application to:
Mail: Austin Water Conservation, PO Box 1088, Austin, TX 78767
Email: waterusecompvar@austintexas.gov
Fax: 512-974-3504

TREE DISEASE / PEST CONTROL - VARIANCE APPLICATION**APPLICANT INFORMATION**

Austin Water Account #: _____

Name of Accountholder: _____

Name of Applicant: _____

Business/Organization: _____

Property Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Mailing Address:
(if different) _____

City: _____ State: _____ Zip: _____

VARIANCE INFORMATION**Type of Variance Requested:**

- Treatment of Tree Disease Prescribed by a Licensed Arborist
 Treatment of Pests Prescribed by a Pest Control Professional

Explain Why You Are Requesting This Variance:

VARIANCE AGREEMENT

I certify that all statements and representations contained in this application are true, correct and complete. I have read and understand the variance eligibility. I have completed each of the required items on the checklist and submitted all required items. I understand that incomplete applications will not be processed and irrigation pursuant to this variance does not exempt me (*or my organization, if applicable*) from complying with Austin Code, Chapter 6-4, Water Conservation.

Signature_____
Date**CITY OF AUSTIN USE ONLY:**Variance: Approved Denied

Site Inspection Date: _____

Staff: _____