



## Fort Collins Utilities Sprinkler Performance Audit Form

Date:

Time:

Auditor:

Site Name:

Company:

Address:

Contact Name:

Contact Phone #:

### System Information

# Zones - Total:	# Controllers:
# Zones – Turf:	Controller Make:
# Zones – Plants:	Controller Model:
# Zones Tested:	# Rain Sensors:

**Audit Results :** Pass: 60% sprayheads (includes multi-stream rotary nozzles), 70% rotors

Controller#	Zone(s) #	Applies to Zone(s) #	Head Type Spray Rotor	Operating Pressure (one sprinkler per zone)	Precipitation Rate (inches/hour)	Distribution Uniformity (percent)	Pass or Fail

I certify that I performed this sprinkler performance audit according to the City's Sprinkler Performance Audit Guidelines and these results are accurate.

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Signature of Auditor