

Summary of Proposed Changes to Water Conservation Code

The proposals on watering restrictions are built on the principle that irrigation methods that apply water more efficiently are allowed greater frequency of use.

Irrigation Methods with No Restrictions

- Several watering methods are currently unrestricted in Conservation Stage and Drought Stages 1 through 3. This remains unchanged in the proposed code:
 - Drip irrigation
 - Hand-held watering
 - Tree and foundation watering with bubblers, irrigation bags or soaker hoses

Two-Days-Per-Week

- Under both current and proposed codes, hose-end sprinklers would be allowed to water two days per week until Stage 2 and then would be limited to one day per week.

One-Day-Per-Week

- Automatic irrigation systems would now be limited to one-day-per-week in all stages (except the emergency Stage 4 where all outdoor irrigation is prohibited), with hours narrowing as the stages progress. Automatic systems can use up to 15 gallons per minute (gpm) compared to 3 gpm for hose-end. People with automatic systems could water a second day with a hose-end sprinkler during Conservation Stage and Stage 1.

New Landscape Variance

- Currently Austin Water allows a variance for any new landscape during Conservation Stage and Stage 1, and only for /drought tolerant landscapes in Stages 2 and 3. In the new proposed code, only drought tolerant landscapes are eligible for variances.

Home Car Wash

- Currently home car washing is only allowed in the Conservation Stage, the stage at which the lakes are the most full. Under the proposal, home car washing with a positive shut-off nozzle or bucket would now be allowed in both Conservation Stage and Stage 1. Home car washing would be allowed in Stage 2 with a bucket, and be prohibited in Stage 3.

Summary of Proposed Changes to Drought Contingency Plan

A revised Drought Contingency Plan (DCP) is required due to the proposed code changes. The DCP is updated to reflect proposed code changes, and update demand triggers for Stage 2 based on additional treatment capacity since the prior DCP submittal.