HIGH-EFFICIENCY TOILET REBATE APPLICATION

Complete application, detach, and mail with original receipt(s) to:
BAWSCA 155 Bovet Road, Suite 650, San Mateo, CA 94402

BAWSCA
Bay Area Water Supply & Conservation Agency

650-349-3000
www.bawsca.org

EPA WaterSense PARTNER

PLEASE PRINT:

APPLICANT FIRST NAME _____ LAST NAME _____

NAME OF WATER AGENCY _____ AGENCY WATER SERVICE ACCOUNT NUMBER _____

NAME ON WATER ACCOUNT (if different from Applicant name) _____

BUSINESS OR HOA NAME (if applicable) _____

INSTALLATION ADDRESS _____ CITY _____ ZIP _____

INSTALLATION DATE _____ APPLICANT PHONE ___-___-____

TOILET INFORMATION (if the information does not fit below, please attach a separate sheet of paper with the requested information):

NUMBER OF TOILETS AT INSTALLATION ADDRESS _____ AGE OF THE TOILET BEING REPLACED _____ NUMBER OF REBATES REQUESTED _____

MANUFACTURER _____ MODEL NAME _____ MODEL NUMBER _____

PURCHASE LOCATION (store name and city) _____ PURCHASE DATE _____

APARTMENT NUMBER FOR EACH MULTI-UNIT RESIDENTIAL AND NUMBER OF TOILETS INSTALLED IN EACH UNIT (attach additional sheet of paper, if necessary):

APT.	QTY.	APT.	QTY.	APT.	QTY.

Offer good for purchases made between July 1, 2015 and June 30, 2016.
Application must be postmarked within 90 days of purchase.
A separate application must be submitted for each metered address.

AGENCY USE ONLY

Check # _____ Check date _____

Amount of actual rebate _____ Date check mailed _____

Signature of Rep. Approving

_____ Date _____

CHECK PAYEE INFORMATION (check one) ☐ NAME ON WATER ACCOUNT ☐ APPLICANT NAME (pre-approval from water agency required if Applicant is not named on water account)

ADDRESS: _____ CITY _____ ZIP _____

DISCLAIMER:

The undersigned expressly agrees that BAWSCA and its participating member agencies: 1) may inspect all properties participating in the High-Efficiency Toilet Rebate Program, 2) do not guarantee the performance of any toilet, 3) do not warrant any toilet or installation to be free of defects, and 4) do not warrant the quality of workmanship, or the suitability of the premises or the toilet for the installation. The undersigned further agrees to defend, indemnify and hold harmless BAWSCA and its participating member agencies including their directors, officers, agents, and employees, from and against any and all loss, damage, expense, claims suits and liability, including attorneys fees arising out of or in any way connected with the toilet(s) and its (their) installation. Applicant has read, understands and agrees to the terms and conditions listed on the High-Efficiency Toilet Rebate Program application. Applicant understands that installation of a qualifying high-efficiency toilet may not result in lower water bills. BAWSCA and its participating member agencies reserve the right to add or remove eligible high-efficiency toilets from the list or change the terms of the incentive offer at any time.

I HAVE READ, UNDERSTAND, AND AGREE TO THE TERMS AND CONDITIONS OF THIS REBATE PROGRAM.

SIGNATURE OF APPLICANT _____ DATE _____