



# Water Conservation Rebate Program Application

Mail to: City of Madera, Water Conservation: Rebate Program,  
1030 S. Gateway Dr., Madera, CA 93637  
Phone: (559) 661-5466 - Fax: (559) 661-0760  
E-mail: [lmcperson@cityofmadera.com](mailto:lmcperson@cityofmadera.com): Web site: [www.cityofmadera.org](http://www.cityofmadera.org)

Date \_\_\_\_\_

**REBATE REQUESTED** (Check rebate(s) being applied for)

- Clothes Washer - \$75
- Dishwasher - \$50
- Low Flow Toilet - \$75
- Mulch - \$50
- Smart Irrigation Controllers - \$150
- Drip Irrigation - \$50
- Hose Faucet Timer - \$30

|                            |   |
|----------------------------|---|
| <b>Account Information</b> | <u>Please print clearly</u><br>City of Madera Utility Billing Account # _____ |
|----------------------------|---|

Account Name \_\_\_\_\_  
 Account Address \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone (1) \_\_\_\_\_ (2) \_\_\_\_\_ Email \_\_\_\_\_

Attention: Renters and Tenants: Participation requires written approval from property owner and/or property manager. Letter must be attached to application when submitted.

Property Owner (if different from above) \_\_\_\_\_ Mailing Address \_\_\_\_\_  
 \_\_\_\_\_ Zip \_\_\_\_\_ Telephone (1) \_\_\_\_\_  
 \_\_\_\_\_ (2) \_\_\_\_\_ E-mail \_\_\_\_\_

|  |   |
|--|---|
| <b>Building Information</b><br><i>(Installation Address)</i> | <b>Building Type (select one):</b> _____ Multi-Family Apt/Duplex<br>_____ Single Family home _____ PUD _____ Condo _____ Mobile Home _____ HOA Shared billing account |
|--|---|

**Number of:** People in selected unit \_\_\_\_\_ Selected unit # (if applies) \_\_\_\_\_ Site Name (if applies) \_\_\_\_\_

Complete, sign, and date this page. Attach proof of purchase before submitting. Incomplete applications will be returned.

### Rebate Information

How did you learn about this rebate? \_\_\_\_\_  
Would you have purchased water conserving products at this time if this rebate was not being offered?  
Is this a replacement for existing equipment? Yes \_\_\_\_\_ No \_\_\_\_\_

### Inspection and Documentation

**INSPECTION:** If an on-site compliance inspection of the installed new product or appliance is required, you will be notified in advance.

**DOCUMENTATION:** To receive rebate, residential customer must purchase and install product, or appliance in compliance with *Rebate Program Guidelines and Conditions*

- Rebate value may not exceed the actual cost of product or appliance
- Application must be received within 60 days of purchase and installation of rebate product or appliance
- Copy of original dated itemized sales purchase receipt must be attached to application for Rebate approval.
- Compliance with *Rebate Program Guidelines and Conditions* is required.
- Application must be approved prior to rebate. Incomplete applications will be returned.

### Agreement of Terms and Conditions

City of Madera may deny any application that does not meet program requirements which can be obtained by calling (559) 661-5466. The undersigned expressly agrees that the City may inspect all items submitted for the City of Madera Rebate Program; that the City does not guarantee the performance of any rebate equipment; and that the City does not warrant any rebate equipment or installation to be free of defects, the quality of the workmanship, or the suitability of the premises or the rebate equipment installation, and upon installation attests they will continue to use and maintain the equipment. The applicant further acknowledges that if their property is found without the rebate equipment or system installed, the rebate credit will be forfeited and a penalty equal to the amount of the rebate will be assessed to the account. The undersigned further agrees to hold harmless the City of Madera against all loss, damage, expense and liability resulting from the loss, destruction or damage to property arising out of or in any way connected with installation of any rebate equipment. The City reserves the right to alter this program at any time without prior notice. Funding for this rebate program is limited to available resources. Rebates are processed on a first come, first served basis.

I have read, understand, and agree to the terms and conditions of this rebate program.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

### For Official Use Only

**TRACKING #** \_\_\_\_\_  
Application: Approved \_\_\_ Denied \_\_\_ Reviewed by \_\_\_\_\_  
Reason for Denial \_\_\_\_\_

**Inspection Date** \_\_\_\_\_ Inspectors \_\_\_\_\_ Rebate: Approved \_\_\_ Denied \_\_\_  
Reason for Denial \_\_\_\_\_

Receipt received \_\_\_\_\_ Comments \_\_\_\_\_ Authorization \_\_\_\_\_

Date to Accounting \_\_\_\_\_ **Amount of Rebate: \$** \_\_\_\_\_

**ACCOUNTING:** Rebate Credit applied : Date \_\_\_\_\_ By \_\_\_\_\_ Voucher No. \_\_\_\_\_