



Polk Regional Water Cooperative

www.SavePolkWater.org



Indoor Water Conservation Programs: WaterSense® Toilet Rebate

Contact:

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Program Qualifications:

- You must be a customer of City of Mulberry Utilities (COM) in a home built in **1994** or before.
- Old toilet(s) is 3.5 gallons/flush or greater (if home was built before 1994 and no new toilets have been installed since 1995, then toilets are considered to be 3.5 gallons/flush or greater and will qualify)
- Old toilet(s) will NOT be re-installed at any location, and will be rendered unusable or disposed of
- New toilet(s) is 1.28 gallons/flush or less and is a WaterSense® labeled toilet(s)

Steps to Apply:

1. Complete this form and submit it to the City of Mulberry using the information above.
2. If you qualify for the program, a reservation number will be issued to you, allowing 30 days for the installation of new toilet(s) and submission of required documents. If more time is needed, contact the City of Mulberry using the information above.
3. **Keep your original toilet(s) until contacted by the City of Mulberry (usually within 2 weeks).**
4. After installation, submit the following **required documents** by mail, email or fax to the contact above.
Be sure to include your reservation number.
 - a. **Pictures of the old and new toilet(s) in place**
 - b. **Your purchase receipt**
 - c. **Plumber information (name, address, phone number, and license number), if applicable**
5. Some participants will be randomly chosen for inspection. If chosen, you will be contacted to set up an inspection appointment to verify the new and old toilet(s).
6. In approximately 4 weeks, you will receive a rebate check of up to \$100.00 per toilet (2 toilets maximum for residential) not to exceed the total price of the toilet(s), required components and installation. There is no rebate for that portion of those collective costs which exceed \$100.00.
7. **The maximum possible rebate is \$100 per toilet.** No more than 2 new toilets per residence can qualify for this rebate program.

QUESTIONS? Contact the City of Mulberry using the information above

Applicant Information: Please print clearly

Utility Billing Account Number _____ Relationship to property (owner, tenant, etc.) _____

Last Name _____ First _____ M.I. _____

Location Street Address _____ Unit # _____ City _____, FL. Zip _____

U.S. Phone (_____) _____ Email _____

Mailing Address (if different from above)

Unit # _____ City _____ State _____ Zip _____

Building Information: Please select

Number of toilets to be replaced (up to 2 per family)

***** Multi-Family and Commercial may be eligible for more than 2 toilets. Please contact the City of Mulberry. *****

Single Family Residence (please indicate) 1 or 2

Old toilet(s) gallons per flush (if known) 3.5 gpf 5 gpf 7 gpf unknown

____ Year the home was home built. (Year built can be found on Polk County Property Appraiser Website www.Polkpa.org)

Have new toilets been installed since 1994? (Please indicate) yes no unknown

Agreement of Term and Conditions

The City of Mulberry will deny any application that does not meet all program requirements. The undersigned expressly agrees that the City of Mulberry may inspect all items submitted for the WaterSense® Toilet Replacement Program. The undersigned further agrees to hold harmless the City of Mulberry and/or Polk Regional Water Cooperative 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 the WaterSense® Toilet Replacement Program. The City of Mulberry reserves the right to alter or discontinue this program at any time. Funding for the rebate program is limited to available resources. Rebates are processed based on the date fully completed applications are received. The City of Mulberry's acceptance of a submitted application does not evidence funds are then available for the rebate program. For further questions, please call (863) 425-1125 ext. 251.

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

Signature of Applicant _____ Date _____

Complete, sign, and date this page. Incomplete applications will be denied and returned

For Official Use Only

Reservation # **COM-TR-** _____

Application: Approved ___ Denied ___ Reviewed by _____

Reason for Denial _____

Documentation

Old Toilet Photo New Toilet Photo Receipts

Inspection

Follow-up Inspection: Yes No

Date of inspection _____ Approved Denied

Inspector: _____

Total cost \$ _____ Customer cost \$ _____ Utility cost \$ _____ District cost \$ _____

Date to Accounting: _____ Amount of Rebate \$ _____

Date Rebate check sent: _____ Check No. _____