

Toilet Replacement Credit Program Residential Application



Water Account Customer Information (please print)

Water bill account number _____
First name _____ Last name _____
Toilet install address _____
Postal code _____ Email address _____
Home phone _____ Cell phone _____
Total number of toilets at address _____ Number of persons at address _____

Old toilet(s) – flush volume

Old toilet #1 13 litres 23 litres unknown

Old toilet #2 13 litres 23 litres unknown

New WaterSense high efficiency toilet #1

Make _____

Model name _____

Model number _____

Reason for purchase bathroom renovation
(please check only 1) credit program
 water conservation
 leaking / broken toilet
 other _____

Installation date _____

Installed by do-it-yourself plumber / contractor

Meter reading when toilet installed (Write down every number from left to right exactly as it appears on your meter, including all zeros.)

Date _____

New WaterSense high efficiency toilet #2

Make _____

Model name _____

Model number _____

Reason for purchase bathroom renovation
(please check only 1) credit program
 water conservation
 leaking / broken toilet
 other _____

Installation date _____

Installed by do-it-yourself plumber / contractor

Meter reading when toilet installed (Write down every number from left to right exactly as it appears on your meter, including all zeros.)

Date _____

Checklist

- I have completed and signed the application form.
- I purchased a WaterSense high efficiency toilet(s) on the approved toilet list.
- I have attached the original sales receipt for the new WaterSense high efficiency toilet(s).
- I have attached a receipt showing that my old toilet was taken to an approved toilet recycling depot (i.e., Brady Road Landfill, Rocky Road Recycling).
- I have read, and understand and agree to the program conditions on the reverse.

Conditions

1. In providing credits for the purchase of specific models of toilets, the City of Winnipeg does not:
 - endorse specific brands, products, or dealers, or
 - guarantee materials, workmanship, performance, or durability of the qualifying toilets.
2. Submitting an application does not guarantee a credit. Credits are issued on a “first come, first served” basis and are subject to funding approved by City Council.
3. Participants may be contacted to follow up with the program requirements.
4. The City will not inspect every installation but may do random checks. This inspection is only to ensure that the customer has met the program requirements. It is not to ensure that the toilet has been properly installed.

Acceptance of Conditions

- In applying for the City of Winnipeg Toilet Replacement Credit Program, I agree:
- to the conditions listed,
 - to provide actual meter readings on a quarterly basis for 12 months following the installation completion date,
 - not to make any claim or take any action against the City of Winnipeg for losses, damages, expenses or costs of any nature whatsoever arising out of or related to my participation in the City of Winnipeg Toilet Replacement Credit Program, and
 - to allow City of Winnipeg employees or agents to enter my residence for an inspection, so long as they provide reasonable notice of the entry.

Applicant Signature

Date (month/day/year)

We recommend you make a copy of all documents for your records as original receipts and forms will not be returned.

Personal Information

We are collecting this personal information so we can set up your toilet replacement credit. We are doing this in accordance with The Freedom of Information and Protection of Privacy Act. If you have any questions, please contact us.

For More Information

- visit our web site at winnipeg.ca/waterandwaste/water/conservation/toiletreplacement
- email slowtheflow@winnipeg.ca
- phone 311, open 24 hours every day

Mail or drop off completed application and original receipts to:

Water Conservation – Toilet Replacement Credit Program
 City of Winnipeg, Water and Waste Department
 110 – 1199 Pacific Avenue, Winnipeg, MB R3E 3S8
 8:30 am - 4:30 pm, Monday to Friday (except holidays)

For internal use only

Date received (MM/DD/YYYY)			Date processed (MM/DD/YYYY)			Application <input type="checkbox"/> approved <input type="checkbox"/> denied by:	
						PRINT	SIGNATURE