



City of Plantation Utilities Department High-Efficiency Toilet Retrofit Program

PLEASE FILL OUT COMPLETELY AND LEGIBLY

CONTROL CODE: 2009 _____

Account No: _____

Name: _____

Physical Address: _____

Zip Code: _____

Phone: _____

E-mail: _____

Qualifications:

1. Toilet(s) being replaced must use the pre-1992 flush rate of 3 to 5 gallons per flush or more.
2. The new replacement toilets must carry the *WaterSense* logo and appear on the EPA *WaterSense* list.
3. The new toilet(s) must use an average of **1.28 gallons or less per flush.**
4. The new toilet(s) must have a MaP [Maximum Performance] rating of **800 grams or more.**
5. The new toilet(s) must be installed **after January 1, 2009, and before August 1, 2009.**
6. **All paperwork necessary for this toilet replacement program must be completed and received by the City of Plantation, Utilities – Customer Service Department no later than August 1, 2009.**

The undersigned agrees to hold harmless the City of Plantation, the Utilities Department and employees from and against all loss, damage, expense and liability resulting from or otherwise relating to the purchase, installation, use, or removal of a toilet.

PROGRAM TERMS & CONDITIONS

THIS IS A CONSERVATION EFFORT ON BEHALF OF THE CITY OF PLANTATION. The City of Plantation Utilities Department may deny any application that does not meet all of the program requirements. The City Utilities Department reserves the right to alter this program or modify program funding at any time at its discretion. This is a limited time offer. Rebates shall be made on a first-come, first-served basis as long as program funding exists. No person making any application for a rebate shall be guaranteed or entitled to receive a rebate. When issued, the rebate will be in the form of a credit in the amount of one hundred dollars (\$100.00) to the applicant's account with the City of Plantation.

By using the **EPA *WaterSense* Labeled High-Efficiency Toilet** list, the City is merely establishing eligibility for a rebate under this Program and does not endorse or recommend any of the items listed. The City is not responsible for the quality of the items purchased and does not warrant or guarantee any products, nor any fixture comprising a component in any toilet or its installation. The City will not assume any liability for any parts, installation and/or delivery nor be held liable for any loss or injury caused in whole or in part, by its actions, omissions, or negligence, or for contingencies beyond its control, in procuring, compiling, or delivering the information; any errors, omissions, or inaccuracies in the information, regardless of how caused, or delays or interruptions in delivery of the information; or any decision made or action taken or not taken in reliance upon the information furnished hereunder. The City does not represent that any particular toilet is suitable for installation at a given location, and disclaims all warranties or suitability of fitness for any purpose. The City of Plantation does not warrant or guarantee lower water bills as a result of participating in the Program. The City of Plantation Utilities Department is not responsible for any damage that may occur to applicant's property as a result of removing the old toilet or installing the new toilet under this Program.

*By signing this form I certify that I have read, understand, and agree to the **Program Terms and Conditions** of this Toilet Rebate Program. I agree to allow the City of Plantation Utilities Department access to the inside of my premises to verify all toilet installations as a condition for obtaining a rebate under this Program. I understand that I must dispose of any toilet by placing it curbside for bulk pickup no more than 72 hours before my scheduled bulk pickup day.*

Applicant's signature: _____ Date: _____

Return either by mail or in person to City of Plantation Utilities Dept., 400 NW 73rd Avenue, Plantation, FL 33317.

FOR CITY USE ONLY:

Toilet Installed: Make / Model: _____ Flush Rate: _____ MaP rating: _____

INSTALLATION VERIFIED BY (Signature) _____ VERIFIED ON (Date) _____