Residential Toilet Rebate Program

PLUMBER / CONTRACTOR VERIFICATION FORM

Customer Name: ________________________________________________________________
Property Address: ________________________________________________________________
Date of Installation: _______________________________

Old Toilet Information:
Toilet 1: GPF ____________ Year of Manufacture ____________
Toilet 2: GPF ____________ Year of Manufacture ____________
Toilet 3: GPF ____________ Year of Manufacture ____________

New Toilet Information:
Toilet 1: GPF ____________ Manufacturer ______________________________________
Toilet 2: GPF ____________ Manufacturer ______________________________________
Toilet 3: GPF ____________ Manufacturer ______________________________________

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I certify that the above information is true and correct, and that the requirements of the City of Fresno Water Conservation Program’s Residential Toilet Rebate have been met.

Signed: ________________________________________ Date: __________________________
Company Name: __________________________________________________________________
Company Address: ________________________________________________________________
Contractor’s License Number: _____________________________________________________

REBATE REQUIREMENTS

New toilets must be rated at 1.28 gallons per flush or less and must bear the WaterSense label. New dual-flush toilets may qualify but must bear the WaterSense label. Old toilets being replaced must exceed 1.6 gallons per flush and must be manufactured before 1992.