


City of Hendersonville 160 Sixth Avenue East Hendersonville, NC 28792		<b>City of Hendersonville Rebate Application</b>	
Customer Service Contacts	Ph# (828) 697-3052 Fax (828) 697-1707	<b>*For Office Use Only*</b>  Account Number _____ Customer ID # _____	
<i>Return <b>application</b> with all required documentation as specified in the program guidelines application for your rebate program of interest. Please note, <b>all material</b> must be provided for a rebate to be granted or considered. You may mail all material to the above address or email us at the email address above. Please identify rebate program on the mailing envelope. Guidelines and application material can be found at: <a href="http://www.hendersonvillenc.gov/rebate-programs">http://www.hendersonvillenc.gov/rebate-programs</a></i>			

**Basic Information:**

Rebate Program (please identify the rebate program of interest):

- |   |   |
|---|---|
| <input type="checkbox"/> High Efficiency Toilet Program         | <input type="checkbox"/> Smart Irrigation System Controller Program |
| <input type="checkbox"/> High Efficiency Clothes Washer Program | <input type="checkbox"/> Customer Side Shut-off Valve Program       |

Please identify whether you are a Residential or Commercial Customer\*      Change:  Residential       Commercial

*\*If you are a commercial client, please be advised that some rebate programs are exclusively for residential customers only. Please review the program guidelines before applying to any program.*

Water Account Number: \_\_\_\_\_ Tax ID #: \_\_\_\_\_  
commercial customers only

Customer Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Service Address (if different) \_\_\_\_\_  
\_\_\_\_\_

<b>Rebate Information: All Receipts must be submitted with the Application Form</b>		
<i>*For Toilet Rebates Only*</i> Replaced Toilet Information	Make	_____
	Model	_____
	Volume Per Flush	_____
<i>If more than one toilet replaced, please provide the above information for each additional toilet replaced:</i>		
Make _____	Model _____	Volume Per Flush _____
Make _____	Model _____	Volume Per Flush _____
Make _____	Model _____	Volume Per Flush _____
*Volume per Flush as measured in Gallons per Flush		
<i>If you do not have the make and model information for the replaced toilets, please provide A-Height of the Water Level in the Tank, B-the Width of the Water Level in the Tank, and C-Depth of the Water Level in Tank below.</i>		
Toilet 1 A _____	X B _____	x C _____
Toilet 2 (if applicable) A _____	X B _____	x C _____
Toilet 3 (if applicable) A _____	X B _____	x C _____
Toilet 4 (if applicable) A _____	X B _____	x C _____
<i>*For Toilet Rebates Only*</i> New Toilet Information		
Make: _____		
Model: _____		

Volume Per Flush:	Purchase Price (not including Taxes):		
<i>If more than one toilet replaced, please provide the above information for each new toilet purchased:</i>			
Make _____	Model _____	Volume Per Flush _____	Purchase Price _____
Make _____	Model _____	Volume Per Flush _____	Purchase Price _____
Make _____	Model _____	Volume Per Flush _____	Purchase Price _____
*Volume per Flush as measured in Gallons per Flush			
<i>Please also provide the Purchase Date and Watersense Status for each new toilet</i>			
Toilet 1 Purchase Date _____	Watersense-Approved Yes or No? _____		
Toilet 2 (if applicable) Purchase Date _____	Watersense-Approved Yes or No? _____		
Toilet 2 (if applicable) Purchase Date _____	Watersense-Approved Yes or No? _____		
Toilet 2 (if applicable) Purchase Date _____	Watersense-Approved Yes or No? _____		

<b>Rebate Information: All Receipts must be submitted with the Application Form</b>		
<i>*For All Other Rebate Programs*</i> New Device Information	Make	
	Model/ Model #	
	Purchase Date	
<i>For Shut-Off Valve, NC Plumber's License # of Plumber</i>		
<i>For Shut-Off Valve, Valve Size (in Inches)</i>		
<i>For Smart Irrigation Controller, is this a new irrigation system or are you replacing an old controller?</i>		<input type="checkbox"/> New Irrigation System <input type="checkbox"/> Replacing an Old Controller
<i>For Smart Irrigation Controller, is the controller Smart-Water Approved?</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>For Clothes Washer, is the clothes washer Energy-Star<sup>®</sup> Approved?</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Terms and Conditions Acknowledgement**

1. I recognize, in submitting this application, that any rebates are offered at the discretion of the City. Submitting an application does not guarantee or oblige the City to provide a rebate.
2. I also agree that I have reviewed the guidelines for the rebate I have applied for. I have submitted or will submit the mandated material in a timely manner.
3. If I fail to complete this application or to provide the required material, I acknowledge that my application for a rebate will be denied.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<b>*For Office Use Only*</b>		
Is Application Approved or Disapproved?	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Comments/Notes:
Customer Service Team Leader Signature _____		Date _____