LOS ANGELES COUNTY WATERWORKS DISTRICTS (LACWD)
WATER-SAVING DEVICE REBATE APPLICATION FORM
(FOR DISTRICTS 21, 36, 37, AND 40 ONLY)

INSTRUCTIONS

1. Purchase and install a qualified high efficiency water-saving device. All devices from the www.socalwatersmart.com *Qualifying Products Lists* are eligible for the rebate.
2. Read, complete, and sign the application form.
3. Mail the completed application form, **original receipt**, and a copy of your water bill to:

Los Angeles County Waterworks Districts
Attn: Water Conservation Manager
PO Box 1475
Alhambra, CA 91802-1475

PROGRAM TERMS AND CONDITIONS

1. Program funding is limited. Applications will be processed on a first-come first serve basis while funding is available.
2. Only customers of Districts 21, 36, 37, and 40 are eligible for the rebate. Customers of Districts 29 and 80 must apply online through www.socalwatersmart.com.
3. The water saving device must be purchased by a current and eligible LACWD customer and installed in the customer's address within LACWD's service area.
4. Only devices listed on the www.socalwatersmart.com *Qualifying Products Lists* are eligible for the rebate.
5. The original and dated receipt must be provided with the application. Duplicate or associate copies will NOT be accepted.
6. For devices purchased online, a print out of the final invoice and the original packing or delivery slip must be provided.
7. The application must be received by LACWD within 90 days of the original purchase date.
8. The rebate amount may not exceed the cost of the device purchased. Rebate amounts do not apply to sales tax and installation costs.
9. Rebate checks will be issued only to the account holder and will be mailed within 8 weeks after rebate approval.
10. A representative of LACWD must be permitted to inspect the property to verify quantity and proper installation if it is deemed necessary and applicable.
11. The application must meet all requirements. Otherwise, it will be rejected and mailed back to the customer.
12. The customer must sign the agreement before the rebate can be issued.
13. LACWD may at any time, modify, suspend, or terminate this program without prior notice.

Account Information

LACWD Account Number:_____ *If your account # begins with 29 or 80, apply through www.socalwatersmart.com.

Account Holder Name: _____

Service Address: _____

Mailing Address (if different from above): _____

Phone Number:_____ Email Address: _____

How did you hear about the program? ☐Mailer ☐Newspaper ☐Radio ☐Website ☐Other_____

Purchase Verification

Rebate Type: (please check)

☐ High Efficiency Clothes Washer (up to $85)

☐ Weather-based Irrigation Controller (up to $80)

☐ Rotating Sprinkler Nozzles ($2 each) Number of Nozzles: _____

Manufacturer:_____ Model Number: _____

Date Purchased:_____ Date Installed: _____

Signature

I have read, understand, and agree to the terms and conditions of the program as stated above.

Applicants Signature:_____ Date: _____