

**Albemarle County Service Authority
Toilet Rebate for Residential Customers
Qualification Form**

Application # _____

Please print clearly to ensure prompt response.

Water Utility Account # _____ () Owner occupied () Renter occupied (Renter responsible for utilities)
Name (print) _____ Work Phone _____ Home Phone _____
Installation Address _____ Zip Code _____
Mailing Address (if different) _____ Zip Code _____
E-mail Address _____

Required Qualifying Information

Year home was built _____ Number of older generation toilets to be replaced: 1 2 3

Toilets:

Number of toilets in home _____

Have any toilets in the home already been updated to a low-flow type? () Yes () No

If 'Yes,' how many? _____ How many replaced as part of previous ACSA toilet rebate program? _____

Will any older model toilets remain in the home after participating in this rebate? () Yes () No

If 'Yes,' how many will remain? _____ Are water displacement devices being used in these? () Yes () No

Showers:

Number of showers in home _____

Have any showerheads been replaced since 1992? () Yes () No If 'Yes,' how many? _____

Bathroom Sinks:

Number of bathroom sinks in home _____

Have any bathroom sink faucet aerators been replaced since 1992? () Yes () No If 'Yes,' how many? _____

Kitchen Sinks:

Number of kitchen sinks in home _____

Have any kitchen sink faucet aerators been replaced since 1992? () Yes () No If 'Yes,' how many? _____

Upon receipt of this application by ACSA, initial eligibility will be determined, and confirmation of approval will be mailed. This confirmation will state the requirements of the toilet rebate program and a date by which toilets must be installed and receipts must be submitted to ACSA.

Funding for this program is limited and offered on a first come, first served basis. Rebate is not guaranteed except by confirmation of approval, and only if program requirements are met.

For ACSA Use Only

of toilets approved _____

Date due _____

Approved by _____