



WATER WISE HOT WATER RECIRCULATOR REBATE PROGRAM APPLICATION and AGREEMENT



Print name as listed on water account _____

Water account address _____ Zip _____

Phone _____ Water Division account number _____

Total Rebate for Hot Water Recirculator \$100.00

Agreement

- Only customers of the City of Santa Fe Water Division are eligible for this program;
- This rebate is not available to those customers that have submitted an approved alternative water budget to the Water Budget Administrative Office;
- Each customer is only eligible for one rebate per account;
- Customer is solely responsible for purchase and installation arrangements and payments;
- City does not warrant, endorse, or assume liability for the quality or performance of the product related to purchase under this program;
- Customer agrees that rebate will be through a credit on his/her utility bill. Your rebate should appear on your utility bill one to two billing cycles after your form is processed;
- Customer agrees that he /she is eligible for a one-time rebate;
- Customer agrees to allow water division enforcement staff to access the premises in order to verify installation;
- Original receipt must be mailed in or brought in with completed rebate application/agreement to the City of Santa Fe within 3 weeks of date of purchase, to be valid. **Please mail original application and receipt to Water Conservation Office, City of Santa Fe, P.O. Box 909 Santa Fe, New Mexico 87504.**
- To ensure funds are available and your account is eligible for a rebate, call (505) 955-4225 before product purchase. Funds are limited and are available on a first come, first serve basis.
- Customer acknowledges by signing application that they are aware and will comply with Ordinance No. 2003-29 and Resolution No. 2004-27.

Applicant's Signature

Date

To be filled out by dealer

Store Name _____

Date of Purchase _____ Purchase Amount _____

Hot Water Recirculator Model _____

Dealer/Plumber Signature/Date _____

To Be Filled in by the Water Wise - Conservation Office Staff

Rebate Application # _____

Service Address # _____ Cycle # _____ Meter Position _____

Staff Signature: _____ Date: _____