



Toilet Rebate Program

Name (please print) _____

Utility Account #: _____

Installation Address _____

Mailing Address (if different) _____

Mailing Address City _____ State _____ Zip _____

Telephone _____ Year Home was Built _____

Number of Bathrooms in Home _____ Number of People in Home _____

Replaced Toilet Information

Estimated tank size of toilet (gallons) being replaced (check one):

_____ 1.6 gallons per flush _____ 3.5 gallons per flush _____ 5 gallons per flush

New Toilet Information

New Toilet Manufacturer (brand) _____ Model Name _____

Model Number _____ Purchase Price _____

All items must be completed to qualify for the rebate

Submit the application and the original receipt dated February 1-December 31, 2017 to Waunakee Utilities to qualify for a bill credit. All rebates received will be on a first come, first serve basis, subject to funds availability. Replaced toilet must be properly disposed to ensure that it is not reused in Dane County. The Village of Waunakee reserves the right to inspect the toilet within 365 day of receiving the application. A full list of terms and conditions on the rebate maybe found at www.waunakeeutilities.com.

I have read, understand, and agree to the terms and conditions of the rebate program.

Applicant Signature: _____ Date: _____

Mail to: Waunakee Utilities PO Box 70, Waunakee WI 53597-0070

Utility use only:	Valid receipt attached:	YES	NO
Amount of rebate approved: \$ _____	EPA WaterSense Product:	YES	NO
Approved by: _____	Date: _____		