P.O.U.R. PROGRAM

Preserve Our Ultimate Resource



Water Conservation Incentive

Please complete and return this form to the Town Office to receive a credit of up to \$100.00 on your Town utility account. Please allow up to eight weeks for the credit to appear on your utility statement. Completion of each field is mandatory to qualify for this Program.

APPLICAN	IT INFO	RMATION	1				
Applicant/Business Name:							
Utility	Account N	lumber:					
Address of Installation:							
	Mailing A	.ddress:					
Phone Number:							
E-mail Address:							
I am a:							
PRODUCT By purchasing \$100.00 credi	g an eligible	e item on the		Program lis	t, you may	be eligible for a reb	pate of up to
	•	•		vour nurcha	se(s) as fo	llows:	
Please provid	e the comp	•	tion about y		ase(s) as fo e / Model	llows:	Quantity
Please provid	e the comp liance	lete informa	tion about y				Quantity
Please provid Fixture / App WaterSense	e the comp liance ®	lete informa	tion about y				Quantity
Please provid Fixture / App WaterSense certified toile Water pressu	e the comp liance ® t ure	lete informa	tion about y				Quantity
Please provid Fixture / App WaterSense certified toile Water pressu reducer Energy Star	e the comp liance ® t ure © certified chine	lete informa	tion about y				Quantity
Please provid Fixture / App WaterSense certified toile Water pressu reducer Energy Stare washing mad	e the composition of the composition of the control	lete informa	tion about y				Quantity
Please provid Fixture / App WaterSense certified toile Water pressureducer Energy Stare washing mad Energy Stare dishwasher Energy Stare water heater	e the composition of the composition of the control	lete informa Manufactu	tion about y	Name additional S	e / Model		

	PROOF OF PURCHASE: Original receipts are not required. Please attach photocopies, scanned images, or photographs of receipts. The manufacturer and model number must be provided.
	PROOF OF INSTALLATION: Please attach photographs of before and after installation or a copy of tradesperson receipt.
	PROOF OF CONSERVATION: Please provide proof of the WaterSense® or EnergyStar® certification, either through photographs of the certification symbols on packaging/item or mode specifications from manufacturer's website or manual.
D	DECLARATION:
I	hereby declare that:
1 2	
3	 I have not previously received a P.O.U.R Program credit for this address during this calendar year.
4	By purchasing the item(s) locally in Drayton Valley, I may be eligible for an additional \$50.00 rebate (one time per year).
5	I agree to have my name entered in an annual draw for a \$500.00 credit on my Town utility account. Should I be the winner of the \$500.00 credit draw, I consent to my name and image being used by the Town of Drayton Valley in announcing my win and in promoting the P.O.U.R Program.
6	I have made every effort to properly dispose the item(s) that were replaced by taking them to the Aspen Waste Management Facility.
7	·
8	I agree to the conditions of the rebate and understand that the Town of Drayton Valley is not responsible for the selection, installation, or performance of any item purchased and installed under this P.O.U.R. Program.
9	. All information provided herein is true and accurate.
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Α	pplicant Signature Date
Pi Pi	ne personal information requested on this form is being collected for the purpose of assessing eligibility for rebate under the P.O.U.R rogram of the Town of Drayton Valley. It is collected under the authority of Section 33 of the <i>Freedom of Information and Protection or rivacy Act</i> , RSA 2000, Chapter F-25, and is used exclusively and expressly for the purpose mentioned above. If you have any questions in disclosure or the use of information, please contact the FOIPP Coordinator at (780) 514-2200.
	Completed applications can be submitted to the Town: In person at 5120-52 Street
	By mail to Box 6837, Drayton Valley, AB T7A 1A1 By email to utilities@draytonvalley.ca By fax to 780-542-5753
	For Office Use Only:
	Received: Approved by: Account Credited By: Initials
	- India

Shop Local Rebate Applied \square