



Plumbing Retrofit Program



Nonresidential TOILET Rebate Application

City of Sioux Falls Public Works • 224 West Ninth Street, P.O. Box 7402, Sioux Falls, SD 57117-7402 • (605) 367-8600

APPLICANT INFORMATION

Property owner name _____
(Customer who is to receive rebate) Last name or company name First name (if applicable)

Contact person _____
(If different from property owner) First and last name Title (if applicable) *example: manager*

Mailing address _____
 Street address, apartment no., PO Box City State Zip code

Telephone number _____
 Home Work

Email address _____

Please print clearly!

INSTALLATION SITE INFORMATION

Residence category *(circle one)* Single-family Multiple-family (more than 3 attached units) **Year constructed** _____

Residence type *(circle one)* Apartments Condo Duplex Manufactured Townhouses Stick-built Other _____

(circle one) **Owner occupied** **Rental** *All rental properties require application by owner or owner's agent*

Sioux Falls Utilities account number _____ *(located on your water bill)*

Retrofit installation address _____ **No. of bathrooms in residence** _____
Street address, apartment no.(s)

Number of toilets replaced _____ **Date of purchase** _____ **Price** _____

Brand of new toilet(s) _____ **Model no.** _____ **Date of replaced toilet(s)** _____
(Date is typically stamped inside the toilet tank and/or lid)

Type of installation *(circle one)* Self Plumber **Name of installer** _____ *(when applicable)*

Date of installation _____ **Installation cost** _____

The City of Sioux Falls will rebate the price of purchase and installation for replacement of inefficient toilets manufactured prior to 1992 with an efficient 1.6 gallon-per-flush toilet in residential properties.

- ⇒ Homes can qualify for up to \$75 for the first toilet, \$60 for the second, and \$50 for each additional fixture.
- ⇒ All nonresidential facilities can qualify for a rebate up to \$50 toward the purchase and installation for each fixture replaced.

Attach a copy of your receipt(s) and work orders with this application form. The rebate is subject to an inspection by City officials to confirm compliance. The City will not provide rebates for toilets in new construction, additions, or replacement of existing 1.6-gallon per flush toilet(s).

Free water conservation devices and information from Public Works

The City of Sioux Falls encourages you to participate in further water savings measures in the home by using flow restrictors, aerators, and efficient showerheads. These devices produce no reduction in performance and help to save water. (Construction and installations after 1992 should meet the lower flow standards and therefore require no changes.) The water conservation kit contains several conservation devices and a booklet with suggestions that will help you save water. A water conservation kit will be provided upon request. They will be provided to you at no charge during the home inspection visit.

Would you like a water conservation kit? *(circle)* YES NO

All rebates are provided on a FIRST COME, FIRST-SERVED basis, subject to availability of funding.

For more information or for questions call Public Works at 367-8600 or visit our website at www.siouxfalls.org/conserve
 Sioux Falls cable channel CityLink 16 provides information on general water conservation issues.

AGREEMENT

In order to receive the rebate, the customer/property owner agrees to the following conditions:

1. I agree to maintain the device(s) installed so that they operate properly and I will not alter them in any way to defeat the intended goal of water conservation.
2. I agree to an inspection visit for confirmation that the devices are properly installed and in operational condition before I can receive my rebate.
3. I agree that device replaced was manufactured before 1992.
4. I agree to dispose of the fixtures/devices that were replaced in a manner that is consistent with good environmental practice and will not allow them to be reused after the final inspection.

Signature

Date

Print name

Contact your tax advisor regarding potential tax issues if the application involves a non-owner occupied property.

Mail completed application and a copy of your receipt and/or work order to:

City of Sioux Falls Public Works
Plumbing Retrofit Program
224 West Ninth Street
P.O. Box 7402
Sioux Falls, SD 57117-7402

Specific documentation that product(s) have been purchased from a Sioux Falls supplier is required. An installer or delivery receipt from the place of purchase in Sioux Falls will not qualify.

QUESTIONNAIRE

1. How many persons in household? _____
2. How did you learn about the plumbing retrofit program? (*circle*)
Bill Insert Retailer/Plumber TV/Networks Newspaper Internet Channel 16 Other _____
3. Would you participate in future conservation programs? Y N
4. I would be interested in the following conservation programs: (*check all that would apply*)
 - Sprinkler system audit (The City inspects system and makes recommendations to reduce water waste)
 - Automatic sprinkler system interrupter (Rain sensor or soil moisture sensor interrupts program when moisture not required)
 - Water-efficient landscaping practices and plants (xeriscaping)
 - Soaker hoses
 - Rain barrels/rain harvesting (collection of rain to use for watering plants and other non-potable uses)
 - Seminars and presentations
 - Child education programs
 - Other _____
5. I participated in the plumbing retrofit toilet rebate program because: (*check one*)
 - I needed to replace my malfunctioning old toilet anyway.
 - I am concerned about conserving water even though my old toilet worked fine.
 - I was remodeling an old bathroom and replacing the fixtures.

VERIFICATION INFORMATION (*office use only*)

Make & model of appliance(s) _____ No. replaced _____ Rebate amount _____

Verification by _____ Date _____

Rebate application: Approved Denied

Additional notes _____

Date rebate filed _____

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