



TOWN OF WALPOLE

**WATER SENSE LABELED TOILET (1.28 GPF) REBATE
APPLICATION FORM**

DATE: _____

First Name _____

Last Name _____

Service Address (Toilet Installed Here) _____

Mailing Address: _____

Town _____ State _____ Zip Code _____ Telephone Number () _____

Number of Toilets Installed _____ (Two [2] maximum per household)

Brand of Toilet(s) _____

Model of Toilet(s) _____

Date of Purchase _____

Date of Installation _____

Age of Toilet(s) Replaced _____ Years _____ Unknown

I understand that the Town of Walpole is providing a \$75.00 rebate of my water/sewer account after purchase (after July 1, 2010) and installation of a Water Sense labeled toilet (1.28 gpf). I have read the toilet replacement Rebate Conditions and Guidelines Informational Sheet and agree and understand the terms.

X _____
Applicant's Signature

_____/_____/_____
Date

FOR OFFICE USE ONLY	
Date Received _____	
Approved _____	Denied _____
Reason _____	
Date Issued _____	Acct. No. _____
Approving Signature _____	