



**TOWN OF WALPOLE**

**CLOTHES WASHER REBATE  
APPLICATION FORM**

***APPLICANT INFORMATION***

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Water Service Account Number

\_\_\_/\_\_\_/\_\_\_

Date Clothes Washer Installed

\_\_\_\_\_  
First Name Last Name

\_\_\_\_\_  
Address (Where clothes washer is installed) please include apt. or condominium no.

\_\_\_\_\_  
Town State Zip Code Telephone Number ( )

***PURCHASE VERIFICATION INFORMATION***

\_\_\_/\_\_\_/\_\_\_      \$ \_\_\_\_\_  
Date Purchased      Brand      Purchase Price (Attach Copy of Receipt)

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Washer Model Number

I certify that this qualifying Energy Star labeled having a water factor of 6.0 gallons or less (see list of washers with water factor at [www.energystar.gov](http://www.energystar.gov)), was purchased after July 1, 2016, new at retail price and installed at the address indicated for personal use, not for resale. I agree to a sale, delivery, product installation verification and/or inspection by an agent of the Town of Walpole. Following verification a rebate of 20% of the price of the washer (not to exceed \$100) will be applied as a credit to the water/sewer account listed on this form.

The undersigned understands that installation of qualifying clothes washers may not result in lower water bills; and that the Town of Walpole does not warranty any clothes washer or installation to be free of defects, the quality of workmanship, or the suitability of the premises for the clothes washer installation. The undersigned further agrees to hold harmless the Town of Walpole, their directors, officers and employees, against all loss, damage, expense and liability resulting from the loss, destruction or damage to property arising out of or in any way connected with installation of a clothes washer. **I have read, understand and agree to the terms and conditions of this rebate program.**

**X** \_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

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