LOW FLOW TOILET REBATE APPLICATION

Complete this application form. Mail to City of Shavano Park, 900 Saddletree Ct., Shavano Park, TX 78231

Property Owner Information: Account # _____

Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Number of Bathrooms: _____

Tenant Information: ***(if different than owner)***

Name: _____
Property Address: _____
City: _____ State: _____ Zip: _____
Phone: _____

Rebate Request:
Number of toilets replaced (Maximum of two 2) 1 ☐ $ 50 2 ☐ $ 100

I have read and understand the following:

- I understand that I can receive a maximum rebate for up to two (2) low-flow (1.6 gallons per flush) toilets in the house – if residence was built prior to 1992.
- I agree to an inspection of my newly installed toilet to participate in this rebate program.

_____ _____
Signature Date

Office Use Only

Date Purchased: _____
Store Name: _____
Location: _____
Original Receipt Attached: Yes ___ No ___ Cost: _____
Inspected By: _____ Date: _____