



## Facility Information

Company Name \_\_\_\_\_

## Contact Information

Contact Last Name \_\_\_\_\_

Contact First Name \_\_\_\_\_

## Original Facility Information - Toilets and Urinals

### Washroom Facilities - Pre retrofit

<b>Toilets</b>	total number of 20L toilets	_____	
	total number of 13L toilets	_____	total number of <b>all</b> toilets
	total number of 6L toilets	_____	_____
<b>Urinals</b>	total number of 5.7L urinals	_____	
	total number of 3.8L urinals	_____	total number of <b>all</b> urinals
	total number of 1.9L urinals	_____	_____

## Proposed Fixture Replacement Information - Toilets and Urinals

### Proposed Replacement Toilet - Option 1

Manufacturer \_\_\_\_\_

**Model Name** \_\_\_\_\_

Bowl Number \_\_\_\_\_

Tank Number \_\_\_\_\_

### Proposed Replacement Toilets - Option 2

Manufacturer \_\_\_\_\_

**Model Name** \_\_\_\_\_

Bowl Number \_\_\_\_\_

Tank Number \_\_\_\_\_

### Proposed Replacement Urinals

Manufacturer \_\_\_\_\_

**Model Name** \_\_\_\_\_

Part Number \_\_\_\_\_

# FIXTURE REPLACEMENT PROGRAM - HVU REBATE - APPLICATION FORM

## Facility Information

Company Name \_\_\_\_\_

## Contact Information

Contact Last Name \_\_\_\_\_

Contact First Name \_\_\_\_\_

## Original Facility Information - Spray Valves, Dishwashers & Washing Machines

### Kitchen/Cafeteria Facilities

#### Spray Valve(s)

total number of spray valves \_\_\_\_\_ Volume of spray valve \_\_\_\_\_ L or approximate age \_\_\_\_\_

total number of spray valves \_\_\_\_\_ Volume of spray valve \_\_\_\_\_ L or approximate age \_\_\_\_\_

total number of **all** spray valves \_\_\_\_\_

#### Commercial Dishwasher(s)

total number of dishwashers \_\_\_\_\_ Volume of dishwasher \_\_\_\_\_ L or approximate age \_\_\_\_\_

total number of dishwashers \_\_\_\_\_ Volume of dishwasher \_\_\_\_\_ L or approximate age \_\_\_\_\_

total number of **all** dishwashers \_\_\_\_\_

### Laundry Facilities

#### Commercial Washing Machine(s)

total number of **top** loading \_\_\_\_\_ Volume of washer \_\_\_\_\_ L or approximate age \_\_\_\_\_

total number of **front** loading \_\_\_\_\_ Volume of washer \_\_\_\_\_ L or approximate age \_\_\_\_\_

total number of **all** washing machines \_\_\_\_\_

## Proposed Fixture Replacement Information - Spray Valves, Dishwashers & Washing Machines

### Kitchen/Cafeteria Facilities

#### Proposed Replacement Spray Valve(s)

Manufacturer \_\_\_\_\_

**Model Name** \_\_\_\_\_

Part Number \_\_\_\_\_

#### Proposed Replacement Dishwasher(s)

Manufacturer \_\_\_\_\_

**Model Name** \_\_\_\_\_

Part Number \_\_\_\_\_

### Laundry Facilities

#### Proposed Replacement Washing Machine(s)

Manufacturer \_\_\_\_\_

**Model Name** \_\_\_\_\_

Part Number \_\_\_\_\_

# FIXTURE REPLACEMENT PROGRAM - HVU REBATE - APPLICATION FORM

## COMPLETE AFTER RETROFIT

### Facility Information

Company Name \_\_\_\_\_

### Contact Information

Contact Last Name \_\_\_\_\_

Contact First Name \_\_\_\_\_

### Fixture Replacement Information

#### Washroom Facilities

<b>Toilets (less than 6L)</b>	total number of <i>single flush</i> toilets	_____	Rebate \$50 per toilet Rebate \$50 per toilet
	total number of <i>dual flush</i> toilets	_____	
	total number of toilets replaced	_____	
<b>Urinals</b>	total number of <b>3.8L urinals</b>	_____	Rebate \$60 per urinal Rebate \$60 per urinal Rebate \$75 per urinal
	total number of <b>1.9L urinals</b>	_____	
	total number of <i>waterless urinals</i>	_____	
	total number of urinals replaced	_____	

#### Kitchen/Cafeteria Facilities

##### Spray Valves

_____ L spray valve	total number of spray valves installed	_____	Rebate Rate 50% of pre-tax price, maximum \$200
	total number of spray valves replaced	_____	

##### Dishwashers

_____ L dishwasher	total number of dishwashers installed	_____	Rebate Rate 25% of pre-tax price, maximum \$1000
	total number of dishwashers replaced	_____	

#### Laundry Facilities

##### Washing Machines

_____ L washer	total number of <b>commercial/top</b> load washers installed	_____	Rebate Rate 25% of pre-tax price, maximum \$1000
_____ L washer	total number of <b>commercial/front</b> loading washers installed	_____	
	total number of washing machines replaced	_____	

### Rebate Requested (copies of original receipts must be provided to process request)

_____ toilets at \$50 per toilet	=	_____ X	\$50	=	\$ _____
_____ urinals at \$60 per urinal	=	_____ X	\$60	=	\$ _____
_____ urinals at \$75 per urinal (waterless)	=	_____ X	\$75	=	\$ _____
_____ spray valves at 50% cost, <b>to maximum of \$200</b>					
total pre-tax spray valve cost		_____ X	50%	=	\$ _____
_____ dishwasher(s) at 25% cost, <b>to maximum of \$1000</b>					
total pre-tax dishwasher cost		_____ X	25%	=	\$ _____
_____ washing machine(s) at 25% cost, <b>to maximum of \$1000</b>					
total pre-tax washer cost		_____ X	25%	=	\$ _____

**TOTAL (maximum \$10,000) \$ \_\_\_\_\_**

# FIXTURE REPLACEMENT PROGRAM - HVU REBATE - APPLICATION FORM

## Program Terms and Conditions

Page 5 - Terms/Conditions

### Eligible Industrial, Commercial and Institutional Properties

To be eligible for consideration under the HVU Rebate Program, a facility must:

- be located in the City of Ottawa (City), and
- be a high volume water user (i.e., consume 25,000 m<sup>3</sup> or more of water per annum), or - be a multi-residential property with 6 or more units.

### Conditions of Payment

Payment of a rebate under the Program is conditional on:

- proof of purchase of the replacement fixtures dated on or after the program start date,
- completed installation of the replacement fixtures indicated on the application form,
- proof of Installation either through the provision of before and after photos or access for an inspection, at the discretion of City staff, and
- proper disposal of the removed fixtures.

### Audit Requirements

- The Recipient shall keep and make available proper books of account and records of the financial management of the Contribution provided under this agreement, in accordance with generally accepted business and accounting practices.
- The Recipient shall make its books, accounts and records available at all reasonable times for inspection and audit by the City, its employees, agents, and the City of Ottawa Auditor General, to ensure compliance with the terms and conditions of this agreement.
- The Recipient authorizes the City, its employees, agents and the City of Ottawa Auditor General, at all reasonable times to inspect and copy any records, invoices and documents in the possession or under the control of the Recipient which relate to the Contribution (Grant).
- The Recipient shall make available program and governance information for audit purposes.
- These audit requirements shall survive for three years beyond the termination of this agreement.

### Standard Rebates

- Toilet rebates will be processed at a rate of \$50 for City approved toilets.
- Urinal rebates will be processed at a rate of \$60 for 3.8L or less and \$75 for waterless.
- Water efficient dishwashers and front load washing machines will be rebated at a rate of 25% of the pre-tax price, up to a maximum of \$1,000 per unit.
- Water efficient spray valves will be rebated at a rate 50% of the pre-tax price, up to a maximum of \$200 per unit.
- All rebates will be processed to a collective maximum of \$10,000.

### Selection of Participants

- The Program does not apply to fixtures installed as a result of new construction or additions.
- The Program is only available to HVU replacing high flow fixtures and equipment with low flow fixtures and equipment.
- Replacement toilets must be selected from the City's approved listing.

### Application Deadline

- The City reserves the right to extend or terminate the Program based on available funds.
- Rebates will be issued on a first-come basis, based on the City's date and time stamp regarding receipt of applications.

### Applicant's Responsibility

Each Applicant must assume all financial and all other responsibility for:

- selecting an installer/plumber as required,
- selecting and purchasing the replacement fixtures,
- any preparatory or repair work that is required for the proper installation of the replacement fixtures, - proper disposal of all old fixtures, and
- ensuring that the proper building/plumbing permit(s) as applicable are obtained.

### Provision of Information and Access to the City

Each approved applicant must provide the City with:

- access to water billing information,
- if requested by the City, within a period of up to six (6) months from the date of receipt by the City of this Application form, access to verify installation and water efficiency.
- The City shall be entitled to use any non-personal or non-identifying information, photographs and other data concerning a selected building in any report and/or promotional materials produced by and/or for the City.