



Albuquerque Bernalillo County Water Utility Authority

URINAL REBATE PROGRAM INSTALLATION VERIFICATION FORM (for Waterless and One Pint Urinals)

Please Return to: Water Resources Division, Water Utility Department, P.O. Box 568,
Albuquerque, NM, 87103. Phone 768-3655

NOTE: Applicant must be a retail customer on the ABCWUA water system, must own property or be owner's agent at installation address, and installation address must meet city code requirements.

Property Owner (Entire form must be completely filled out to be processed.)

Name _____

Mailing Address _____

Installation Address _____

Home Phone _____ Work Phone _____

ABCWUA Water Account#

Type of Installation: Plumber Installation: Homeowner Installation: (check one)

Brand and Model of Toilet(s) Installed: _____

(A HOMEOWNER INSTALLATION MUST BE CERTIFIED AFTER INSTALLATION BY A LICENSED PLUMBER.)

Number of Fixtures Replaced	Amount
_____ Urinals @ \$75 ea.	_____

Total Rebate Due: _____

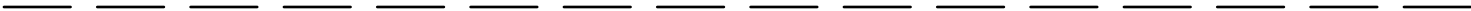


Albuquerque Bernalillo County
Water Utility Authority

**URINAL REBATE PROGRAM INSTALLATION VERIFICATION FORM
CERTIFICATION**

I certify that I have replaced waterless or 1-pint urinal(s) in my property and that the above information is correct. I have read, understand, and agree to the Program Conditions listed at the bottom of this page. I understand that providing false information may result in voiding any rebate.

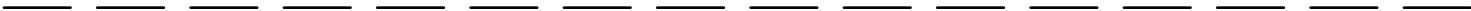
Property Owner/Utility Customer Signature Date



PLUMBER (must be completely filled out upon installation or inspection of homeowner installation.)
I verify that I am a licensed plumber working for a plumbing or general contractor licensed by the State of New Mexico, that the above information is accurate, that the above-mentioned customer is eligible for a rebate for urinals(s) , and that I will remove, disable, and deliver the old urinals for recycling. I understand that providing false information to verify a rebate is a criminal offense.

Plumber/Contractor Signature Plumbing or General Contractor Company

Plumber License Number Date Plumber or General Contractor License Number



To be filled in by the Water Resources Staff

Rebate Application #	Rebate Expiration Date
Date Entered By Name: Date:	Date Approved By Name: Date:



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URINAL REBATE PROGRAM

Program Requirements

- Customer is solely responsible for purchase of urinal installation arrangements and payment.
- ABCWUA does not warrant, endorse, or assume liability for the quality, performance, or safety of any plumber or contractor, its employees, or agents related to purchase under this program.
- Rebate certification form must be returned to the ABCWUA by the expiration date to be valid.
- Customer agrees not to alter the urinals in order to increase the flow of water through the fixtures.
- Customer agrees that rebate(s) will be through credit(s) on his/her water bill. Your rebate should show up on your water bill one to two billing cycles after it is processed.
- Customer agrees that old urinal(s) will be disabled and removed by the plumber/contractor.
- Customer agrees that plumber/contractor may refuse to replace urinal if customer does not agree to pay for improvements that are necessary for proper functioning of urinal.
- Customer agrees to allow ABCWUA inspector access to verify installation if selected for random inspection.
- To ensure fund are available for your rebate, call 768-3655 before replacing urinal(s)

Note: Rebate credits must remain at the address where the water conservation work has taken place. You may not transfer the credit from the location of the savings to another account, even if both properties are owned by the same person.