

THE TOWNSHIP OF GUELPH/ERAMOSA ROCKWOOD TOILET REBATE PROGRAM APPLICATION FORM

Customer Information PLEASE PRINT CLEARLY	
Name:	Phone:
Address:	
Rebate Information	
Manufacturer name	Model name and number \$75 Rebate
PLEASE ATTACH TOILET RECEIPT TO THIS APPLICATION FORM. Any missing information will delay your rebate.	
Please note: A limited number of rebates are available for the program. Rebates will be issued on a first come, first serve basis. Rebates are only available to Rockwood residents that are connected to the municipal water system. The rebate amount will be sent to you by cheque. To qualify residents must also purchase a toilet from the <i>City of Guelph's</i> Residential Eligible Toilet List. For a complete list of toilet models visit guelph.ca/royalflush or you may pick up a copy with this application form at the Township office (address below).	
In consideration of receiving a rebate in this Program, I release the Corporation of the Township of Guelph/Eramosa, and its agents and employees ("the Township") from all claims and actions, however caused, arising from my participation in this program. I acknowledge that the Township is not responsible for the selection, operation or installation of any toilet replacement under this Program. The Township reserves the right to alter or cancel the Program at any time.	
If you have any questions please contact Donna Button Compliance Administrative Assistant @ 519.856.9596 ext. 122	
 ☐ I have read, understand and agree to the terms and conditions of the Toilet Rebate Program. ☐ I certify that I am replacing a 6-litre or more toilet model with a new WaterSense ® labeled model. 	
Customer signature	Date
Detach this application form and mail it, along with a copy of your sales receipt to: Rockwood Toilet Rebate Program Township of Guelph/Eramosa 8348 Wellington Road 124	

Personal information on this form is collected under the legal authority of the Municipal Act, S.O. 2001, c.25 as amended. The information is collected and maintained for the purpose of creating a record pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection should be directed to the Clerk's Office. 519-856-9596 ext. 125.

Alternate formats of this form are available upon request

Box 700, Rockwood, ON

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