

# Village of Roberts, Wisconsin

107 East Maple Street \* Roberts WI 54023 \* (715) 749-3126

email address: vilofrbt@baldwin-telecom.net



## High Efficiency Toilet/Faucet/Showerhead Rebate Program

*funded through the Good Neighbor Housing Initiative*

### Eligibility Requirements to Receive a High Efficiency Rebate for Single-Family Homes, Condos, Multi-Family Dwellings or Business Establishments:

- \* Property where toilet/fixture is installed is a customer of the Roberts Water Utility.
- \* Applicant must be the owner of the property listed on the rebate application.
- \* Old toilets/fixtures cannot be reused.
- \* New construction installations are not eligible for rebate.
- \* Only kitchen and bathroom sink faucets are eligible for rebate--Bathtub faucets are excluded.



\$50 rebate to residents who replace a high-volume toilet with an EPA WaterSense high efficiency (1.28 gallon/flush) toilet

# \$50



\$25 rebate to residents who replace old faucets with an EPA WaterSense model (bathroom, 1.5 gallon/min; kitchen, 1.8 gallon/min)

# \$25



\$25 rebate to residents who replace old showerheads with an EPA WaterSense model (2.0 gallon/minute)

# \$25

**New toilet/fixture MUST be listed on the EPA's WaterSense model list. Follow this link for products eligible for this rebate:** [http://www.epa.gov/watersense/product\\_search.html](http://www.epa.gov/watersense/product_search.html)

- \* Owners who occupy the dwelling may use either a licensed plumber to install the toilet/fixture or do it themselves. Owners who do not occupy the dwelling must use a licensed plumber for installation.
- \* A picture showing proof of installation is required to be attached to this application in order to receive rebate. If installed by a licensed plumber, no picture is needed if installation address is on invoice/receipt.
- \* An original copy of dated sales receipt (dated on or after June 1, 2021) listing the make and model numbers **MUST** accompany the rebate application.
- \* Applicant understands that their rebate may be withheld until any or all of the above conditions are met.
- \* Rebates are limited to \$100 annually per household and are available until program funds are exhausted.

*Submit applications and all required  
attachments by mail to:*

**Village of Roberts  
107 Maple Street  
Roberts, WI 54023**

# Village of Roberts, Wisconsin

## High Efficiency Toilet/Faucet/Showerhead Rebate Application Form

NUMBER OF  
TOILETS REPLACED

NUMBER OF SHOWER-  
HEADS REPLACED

NUMBER OF FAUCETS  
REPLACED

### NEW TOILET OR FIXTURE INFORMATION:

TOILET SHOWERHEAD FIXTURE  
*CIRCLE ONLY ONE*



Date of Purchase \_\_\_\_\_  
Store Where Purchased \_\_\_\_\_  
Purchase Price \_\_\_\_\_  
Manufacturer \_\_\_\_\_  
Model Name and Number \_\_\_\_\_

TOILET SHOWERHEAD FIXTURE  
*CIRCLE ONLY ONE*



Date of Purchase \_\_\_\_\_  
Store Where Purchased \_\_\_\_\_  
Purchase Price \_\_\_\_\_  
Manufacturer \_\_\_\_\_  
Model Name and Number \_\_\_\_\_

### REQUIRED DOCUMENTATION

**MUST ACCOMPANY THIS APPLICATION:**

- An original copy of dated sales invoice(s) (dated on or after 6/1/2021) identifying the make and model numbers.
- An original or copy of licensed plumber's installation invoice OR photograph showing proof of installation by owner.



Village of Roberts  
107 East Maple Str  
Roberts, WI 54023

<b>REBATE CHECK TO BE MAILED HERE</b>	APPLICANT'S NAME _____
	STREET ADDRESS/P.O. BOX _____
	CITY _____ STATE _____ ZIP _____
ADDRESS OF INSTALLATION, IF DIFFERENT FROM ABOVE: _____	

*I understand that rebates provided by this program will be awarded on a first-come/first-served basis, subject to availability of funds. By signing this application below, I certify to the Village of Roberts Water Utility that the replaced toilet/fixtures will not be reused.*

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

### FOR ADMINISTRATIVE USE ONLY

ACCEPTANCE DATE	<input type="text"/>	<input type="checkbox"/>	ELIGIBLE SINGLE-FAMILY PROPERTY
REJECTION DATE	<input type="text"/>	<input type="checkbox"/>	MULTI-FAMILY/BUSINESS PROPERTY
REASON FOR REJECTION	_____	<input type="checkbox"/>	Check # _____
	_____	<input type="checkbox"/>	Date Issued# _____