



Water Wise CII Incentive Program Incentive Application Form

Applicant Information

Business Name: _____

Business Contact: _____

Contact Person Title: _____

Contact Mailing Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

Name of Facility: _____

Facility Address: _____

Water Service Account #(s) serving the site (include all meters):

Describe type of business or institution:

Project
Project number _____ of a total of _____

Attached Project Proposal
___ Yes

Brief Project Description

Estimated annual water savings: _____ GPD/GPY
Estimated project life: _____ years
Estimated total project cost: \$ _____
Expected completion date: _____

Terms and Conditions

By signing this application form I acknowledge that I understand that participation in the Water Wise CII Incentive Program is voluntary and certify that the information supplied on this application is true and correct. I understand that participation in this program is conditioned upon approval of this application by the City of Santa Barbara [City] and that the City makes specific incentive commitments only through an Incentive Application Form. I understand that the City reserves the right to reject this application based on program criteria and that, if the City approves this application, I will receive a letter of approval and a Participation Agreement prepared by the City. I understand that the customized commercial incentive must be for new and purchased equipment on or after the Program start date of May 8, 2013.

Applicant signature: _____

Print Applicant's Name: _____

Signer's Title: _____ Date: _____

For City of Santa Barbara Use Only

Notice of Approval- valid only if signed by City employee

Signature	Date
_____ Application approved	_____ Comments attached
Potential rebate amount \$ _____	
Installation deadline _____	Project life _____ years

