



# Polk Regional Water Cooperative

PRWCwater.org



## Indoor Water Conservation Programs: Water Conservation Kit

**Contact:**

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**Phone:** (863) 837-5112

(\*Required information\*)

**Items in Conservation Kit:**

- (1) Showerhead
- (1) Kitchen faucet aerator
- (2) Bathroom faucet aerators
- (2) Toilet leak detection dye tablet packets

**Account Information: Please print clearly**

Utility \_\_\_\_\_  
Utility Billing Account Number \_\_\_\_\_

**\*Applicant Information: Please print clearly\***

Last Name \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_  
Street Address \_\_\_\_\_ Apartment # \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_  
Mailing Address (if different from above) \_\_\_\_\_  
\_\_\_\_\_

**Building Information: Please select**

\_\_\_ Single Family: HOA? Yes / No                      \_\_\_ Commercial  
\_\_\_ Multi-Family/Apt (# of Units \_\_\_\_\_)                      \_\_\_ Other(Explain): \_\_\_\_\_

**Property Information:**

\_\_\_ Owner \_\_\_ Tenant  
When was the property constructed? \_\_\_\_\_ (Please verify using polkpa.org or leave this section blank)  
How many bathrooms are on your property? \_\_\_\_\_

**\*Agreement of Term and Conditions\***

The utility may deny any application that does not meet program requirements. The undersigned further agrees to hold harmless the utility against all loss, damage, expense, and liability resulting from the loss, destruction of damage to property arising out of or in any way connected with the installation of the Water Conservation Kit. The utility reserves the right to alter this program at any time. Funding for the rebate program is limited to available resources. For further questions, please call (863) 837-5112.

I have read, understand, and agree to the terms and conditions of this program.

\*Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Complete, sign, and date this page.

**For Official Use Only**

Reservation # \_\_\_\_\_  
Date of giveaway \_\_\_\_\_  
Total cost \$ \_\_\_\_\_ Utility cost \$ \_\_\_\_\_ District cost \$ \_\_\_\_\_  
ACCOUNTING: Date to Accounting \_\_\_\_\_ Check No. \_\_\_\_\_ Payment Date \_\_\_\_\_  
Location code: \_\_\_\_\_