# CONSERVE & SAVE®

# 2017 RAIN BARREL \$10 REBATE APPLICATION

Rain barrels can be placed under a roof downspout to collect stormwater runoff that can be used for watering your lawn and gardens. This reduces runoff that carries pollutants into streams and rivers. Rain barrels:

- Conserve water in the summer months
- Help lower water bills
- Reduce water pollution
- Help keep excess water out of the sewer system
- Are easy to install

Step 1:

### **SECTION A. CUSTOMER INFORMATION (please print)**

| Customer Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Account Number                                          |                                |                      |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                         |                                |                      |  |
| Home Phone Number (with area code)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | baytime Phone Number (with area code)                   | E-mail Address                 |                      |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 0:5                                                     | Ctata                          | Zin Oodo             |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | City                                                    | State                          | Zip Code             |  |
| Installation Address (if different from mailing addres                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | s) City                                                 | State                          | Zip Code             |  |
| Step 2:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                |                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | se send me a rebate check.                              |                                |                      |  |
| (Rebates \$75 and under will be applied to your account                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | nt. If a box is not checked a bill credit will automati | ically be issued.)             |                      |  |
| Step 3:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                |                      |  |
| How did you hear about CONSERVE & SAVE®?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Billboard Chamber of Commerce                           | Contractor Newspaper R         | adio Retailer/Vendor |  |
| Social Media TV Utility Newsletter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Utility Representative Utility Web Site                 | Other                          |                      |  |
| Step 4:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                |                      |  |
| I am a: My building type is:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Iama: M                                                 | ly home/business is heated by: | My water heating is: |  |
| Residential Customer Single Family                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Owner/Occupant                                          | Electric                       | Electric             |  |
| Commercial Customer Multi- Family<br>buildings with 3 or i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | nore units Renter                                       | Gas<br>Don't Know              | Gas<br>Don't Know    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Neillei                                                 | Don't Know                     |                      |  |
| SIGNATURE: I certify: I have completely filled out Section A   I have read, understand, and agree to the terms and conditions – Section C, #1   I have attached all support materials – Section C, #3   All equipment has been installed at the address listed in Section A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                         |                                |                      |  |
| CUSTOMER SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                         | Date                           | processing time.     |  |
| TEAMING UP TO SAVE YOU MONEY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                         |                                |                      |  |
| TEAMING OP TO SAVE YOU MONEY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                         |                                | tal Rebate Amount:   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Date Received Date Pro                                  | ocessed                        |                      |  |
| Currentieve for Better Livier<br>OWATONNA<br>PUBLIC UTILITIES<br>OWATONNA<br>PUBLIC UTILITIES<br>PUBLIC UTILITIES<br>OWATONNA<br>PUBLIC UTILITIES<br>PUBLIC | Appliance/Equipment                                     | <b>T</b>                       |                      |  |
| <b>CONSERVE &amp; \$AVE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ID Verified By                                          | FILE NAME:                     |                      |  |

|              | What is the main reason for installing your rain barrel? (check one) |  |  |
|--------------|----------------------------------------------------------------------|--|--|
| Residential  | To save money on water bill                                          |  |  |
| Commercial   | To reduce municipal water demand                                     |  |  |
| Multi-Family | To reduce storm water runoff                                         |  |  |
| Other        | To increase ground water recharge                                    |  |  |
|              | It's good for the environment                                        |  |  |
|              | Happier plants                                                       |  |  |
|              | Other                                                                |  |  |

| Store/Website of Purchase |                                                   |
|---------------------------|---------------------------------------------------|
|                           |                                                   |
|                           | OFFICE USE ONLY                                   |
|                           |                                                   |
|                           |                                                   |
|                           |                                                   |
| Date of Installation      | Rebate Total: \$                                  |
|                           |                                                   |
|                           | Store/Website of Purchase<br>Date of Installation |

#### **SECTION C. REBATE APPLICATION CHECKLIST**

## This program offers a \$10 rebate for the purchase or construction of a new rain barrel. Use this checklist to complete the steps to receive your rebates:

- **1.** Read the following terms and conditions to determine if you are eligible for a rebate:
  - Only one service address per application.
  - Applicant, if selected for random inspection, agrees to allow inspector access to the premises in order to verify installation.
  - There is a limit of 5 rain barrel rebates per account.
  - Rebate valid only for rain barrels that are least 40 gallons in size.
  - If applicant builds own rain barrel(s), rebate may be used for materials.
  - The Utility reserves the right to apply rebates to past due accounts. Rebates \$75 and under will be applied to your account. Rebates will not exceed the purchase price.
  - Applicant must be a water customer of Austin Utilities, Owatonna Public Utilities, or Rochester Public Utilities.
  - Due to limited funding, this rebate offer can be withdrawn at any time without notice. Applications will be processed on a first-come, first-serve basis. All applications from this year's purchases (2017) must be received by March 31, 2018.
  - Rebates can only be offered on equipment that is installed while funding is in effect. In the event our program is discontinued due to depleted funds, we will not provide a rebate for items installed between the discontinued date and the end of that year.
- 2. Complete the application, making sure to fill out all required sections in detail. Allow 6-8 weeks for processing. Missing or incorrect information will increase the processing time.
- **3.** Include a final, detailed copy of the original sales receipt, invoice, or picking slip showing the customer name, date of sale, manufacturer name, model number, and date of installation. If applicant builds own rain barrel(s), all receipts for materials, along with a picture of the rain barrel, must be submitted to receive a rebate.
- **4.** Sign the application.
- 5. Mail completed forms and required documentation to your utility provider:

Austin Utilities Attn: Rebate Processing 1908 14th St NE Austin, MN 55912-4904 507.433.8886 www.austinutilities.com Owatonna Public Utilities Attn: Rebate Processing PO Box 800 Owatonna, MN 55060-0800 507.451.2480 www.owatonnautilities.com **Rochester Public Utilities** 

Attn: Rebate Processing 4000 E River Rd NE Rochester, MN 55906-2813 507.280.1500 www.rpu.org