City of Los Angeles Department of Water and Power Water Conservation Technical Assistance Program

Date

Application Form (Use separate form if submitting for more than one project.)

Customer Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Sic Code	
Contact Person				Area Code	Telephone of Contact	
)		
Address where project is to be installed						
Contact Person						
City			Zip		Fed. Tax I.D.	
		CA				
Customer's Mailing Address for Ince	ntive Check					
C/O or Attn:						
City					State	Zip
Brief Project Description						
Water Benefits						
1. Light Annual Water S	l l	2.			3. \$	inst Cost
Estimated Annual Water S			Life (Years) of Projec	J.	Estimated Proj	ect cost
PROVISIONS AND CONDITIONS (Qualification: To qualify for an incer	ntive, the project r	nust permanently reduce	potable water use.			
until a written letter of project accept ed application for proper evaluation a	and verification of	project water savings and	l costs. The Los Ang	eles Department of V	Water and Power reserves the right	t to reject any Technica
Assistance Program application. All c Tax Liability and Tax Credits: All inco			* *	~	. ,	•
of tax credits.	1.7	r		,	<i>8</i> ,	
AGREEMENT I agree that my participation in the T						
set forth by the Los Angeles Departm supplied is true and correct. I unders						
and that specific incentive commitme acceptance will specify the potential i						
be made in writing and approved by I agree that the project for which a To	_	=		ration as designed f	or a paried of not less than five (5	i) waara from the data a
incentive payment. I agree to refund t	to the Los Angeles	Department of Water and	l Power a prorated an			
and Power, if the project is not opera	ted as designed for	the entire live-year perio	u.			
Print Name of Authorizing Official		Signature of Autho	rizing Official		Title	Date
FOR CITY USE ONLY	Customer of Rec	ord				
	Date Received				Actual HCF	
Due Installation Installation	HedelVCu				Reduced	
Pre-Installation Inspection		Accept, Reject or	("A", "R")			
Completion Date		Withdrawn	. OL M., ,			
				Signature of it	ncentive Coordinator	Date
Post-Installation Inspection		Accept, Reject or	("A", "R")	Signature of ii		Datetive Amount

Signature of Incentive Coordinator Date Authorizing Signature Date

	make sure you include the following before mailing:
ned	and dated application
	Backup documentation to support your water savings calculations
	Specification sheets for any water-conserving equipment to be installed
	Breakdown of installed equipment costs

FOR FURTHER INFORMATION CONTACT:

Los Angeles Department of Water and Power **Technical Assistance Program** P.O. Box 51111, Room 1463 Los Angeles, CA 90051-0100 Telephone (800) 544-4498 Fax (213) 367-1055