



BOARD OF COUNTY COMMISSIONERS  
**WATER AND WASTEWATER SERVICES (WWS)**  
**BUSINESS OPERATIONS DIVISION**  
 2555 WEST COPANS ROAD, BLDG. 1  
 POMPANO BEACH, FL 33069  
 (954) 831-3250 • [water@broward.org](mailto:water@broward.org)

## MULTI-FAMILY ASSOCIATION APPLICATION FOR USEPA WATERSENSE® TOILET CREDIT

<b>(1) APPLICANT INFORMATION</b>	CUSTOMER NUMBER: _____
WWS ACCOUNT NAME: _____	
REPRESENTATIVE'S (REP) NAME: _____	
PHOTO ID: REP: _____ (____) _____	
TYPE	STATE
<b>LIST ALL ADDRESSES AND UNITS ON PAGE 2.</b>	
SERVICE ADDRESS: _____	
STREET	CITY
STATE	ZIP + 4
MAILING ADDRESS: _____	
SAME AS ABOVE	STREET
CITY	STATE
STATE	ZIP + 4
PHONE: HOME: _____ WORK: _____ MOBILE: _____	
E-MAIL ADDRESS: _____	

<b>(2) SUPPORTING DOCUMENTATION</b> (Choose One)	NUMBER OF TOILETS (Max. 50) _____	
Vendor or Plumber Letterhead: Paid receipt for <b>purchase</b> of USEPA WaterSense®-certified 1.28 GPF toilet(s).		
Vendor or Plumber Letterhead: Paid receipt for <b>installation</b> of USEPA WaterSense®-certified 1.28 GPF toilet(s).		
MAKE: _____	MODEL: _____	NUMBER: _____
MAKE: _____	MODEL: _____	NUMBER: _____
MAKE: _____	MODEL: _____	NUMBER: _____

**APPLICANT AGREEMENT:** I AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE REGARDING THE PURCHASE, PERMITTING, AND INSTALLATION OF USEPA WATERSENSE®-CERTIFIED 1.28 GPF TOILET(S) FOR THE REFERENCED MULITI-FAMILY AND/OR CONDO ASSOCIATION PROPERTY. I AGREE TO COMPLY WITH ALL CURRENT AND FUTURE FEDERAL & STATE LAW, BROWARD COUNTY ORDINANCES AND REGULATIONS, AND BROWARD COUNTY WATER & WASTEWATER POLICIES AND PROCEDURES. I UNDERSTAND THAT ANY CREDIT OBTAINED FRAUDULENTLY WILL RESULT IN A REVERSAL OF ACCOUNT CREDIT.

**X** \_\_\_\_\_ **DATE** \_\_\_\_\_

<b>FOR INTERNAL USE ONLY:</b>	<b>APPROVE</b>	<b>DISAPPROVE (REASON)</b> _____	
_____	_____	_____	_____
CUSTOMER NO.	UAZ	PREMISE NO.	CS REP
			MANAGER

# MULTI-FAMILY ASSOCIATION APPLICATION FOR USEPA WATERSENSE® TOILET CREDIT

ADDITIONAL ADDRESSES AND UNITS

CUSTOMER NUMBER \_\_\_\_\_

PROPERTY ADDRESS

UNIT # (If Applicable)

# OF TOILETS

	PROPERTY ADDRESS	UNIT # (If Applicable)	# OF TOILETS
1			
2			
3			
4			
5			
6			
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