"Smart" Irrigation Controller Rebate Program

Residential City of Olympia water customers with in-ground irrigation systems are eligible to receive a rebate of up to 50%, not to exceed $200, for the installation of an approved "smart" irrigation system controller. Smart controllers are irrigation timers that automatically adjust watering times based on weather conditions to provide optimal moisture for healthy plants and lawns, all while conserving water. For a list of approved devices, please visit www.olympiawa.gov/waterwise.

Homeowner please provide:

Name: _____ Address: _____

Telephone: _____ Email (optional): _____

Along with this rebate form, you **must attach the original dated sales receipt and labor invoice**, specifically itemizing the product purchased and work performed, in order to receive this rebate. If approved, you will receive your rebate check within thirty (30) days.

Please read and sign:

I, the undersigned, understand that this is a limited program subject to availability of funds and that I must submit this form by December 31, 2017. I understand that it is my responsibility to coordinate with a licensed irrigation contractor for the device installation and to obtain verification from the licensed irrigation contractor that the controller has been properly installed. I agree that City of Olympia staff or representatives may inspect the device rebated on my property. City of Olympia does not warranty contractor work or guarantee that the device will work as advertised.

I understand that the City of Olympia reserves the right to deny any rebate application if the applicant does not comply with program qualifications, procedures, and specifications.

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

_____ _____ _____

Homeowner Signature | Print Name | Today's Date

Licensed irrigation contractor please provide the following (required for rebate):

Device Information

Manufacturer	Model #	# Zones	Installation Date	Device Cost	Labor Cost

I confirm the device was installed according to the manufacturer's specifications at the address listed above.

Company Name: _____ Contractor License # : _____

Phone: _____ Contractor Signature: _____

Return to:
Erin Conine, Water Resources
City of Olympia
P.O. Box 1967
Olympia WA 98507-1967

Utility Use Only:

_____ _____ _____

Approved By | Date | Amount