



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)

ATTACHED:  
 ① PHOTO ID (S)  
 ② SUPP DOCS  
 By \_\_\_\_\_  
 Date \_\_\_\_\_

## APPLICATION FOR RESIDENTIAL CREDIT FOR USEPA WATERSENSE® TOILET

**(1) APPLICANT INFORMATION**

TYPE OF RESIDENCE:  House  Apartment  Mobile Home  Condo  Other \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

REPRESENTATIVE'S NAME (if applicable): \_\_\_\_\_

PHOTO ID: APPLICANT: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
TYPE STATE NUMBER

REP. (if applicable): \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
TYPE STATE NUMBER

PROPERTY ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP + 4

MAILING ADDRESS: \_\_\_\_\_  
 SAME AS ABOVE STREET CITY STATE ZIP + 4

PHONE: HOME: (\_\_\_\_\_) \_\_\_\_\_ WORK: (\_\_\_\_\_) \_\_\_\_\_ MOBILE: (\_\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**(2) SUPPORTING DOCUMENTATION** **1 TOILET** **2 TOILETS**

Vendor or Plumber Letterhead: Paid receipt for purchase of USEPA WaterSense®-certified 1.28 GPF toilet(s).

Vendor or Plumber Letterhead: Paid receipt for installation of USEPA WaterSense®-certified 1.28 GPF toilet(s).

Affidavit: Installation of USEPA WaterSense®-certified toilet(s) by \_\_\_\_\_

**Make, Model and 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 MY RESIDENTIAL 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** \_\_\_\_\_

**FOR INTERNAL USE ONLY:** **APPROVE** **DISAPPROVE (REASON)** \_\_\_\_\_

\_\_\_\_\_

CUSTOMER NO. UAZ PREMISE NO. CS REP MANAGER



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**APPLICATION FOR RESIDENTIAL CREDIT FOR USEPA WATERSENSE® TOILET**

**CUSTOMER AFFIDAVIT**

APPLICANT TYPE:  Owner  Tenant CUSTOMER NUMBER: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP + 4

PHONE: HOME: (\_\_\_\_) \_\_\_\_\_ WORK: (\_\_\_\_) \_\_\_\_\_ MOBILE: (\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

I, \_\_\_\_\_, attest, verify and confirm that United States Environmental Protection Agency (EPA) approved 1.28 GPF high efficiency WaterSense® labeled toilet (s) has/have been purchased and installed (with an approved permit) at the referenced utility account residential premise.

Date of purchase was: \_\_\_\_\_.

Date of installation was: \_\_\_\_\_.

I, \_\_\_\_\_, being first duly sworn on oath according to law, deposes and says that [he / she] has read the foregoing Broward County Water and Wastewater Services Customer Affidavit, by [his / her] subscribed, that the matters stated herein are true to the best of [his / her] information, knowledge and belief.

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

**NOTARY**

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_, 20 \_\_\_\_.

By \_\_\_\_\_

**FOR INTERNAL USE ONLY:**

\_\_\_\_\_  
CUSTOMER NO. UAZ PREMISE NO. CS REP MANAGER