



# Water Demand Reduction Program Application and Property Owner Waiver

Central Coast Energy Services (Contractor) in conjunction with the City of Watsonville agrees to install one or more low-flow toilets and other water conservation measures at **no cost to the owner** for the following dwelling unit(s) within the City of Watsonville water service area.  
See reverse for instructions.

**SECTION 1: MUST BE COMPLETED BY THE APPLICANT.** *If you are the Owner of the dwelling, you must also complete Section 2.*  
**SECCION 1: DEBE SER COMPLETADA POR EL APLICANTE.** *Si usted es el Dueño de la vivienda, también debe llenar la Sección 2.*

<b>Applicant Name:</b> <b>Nombre del Apicante:</b>			
<b>Street Address:</b> <b>Domicilio:</b>		<b>Unit #:</b> <b># de Unidad:</b>	
<b>City/Zip:</b> <b>Ciudad/Código Postal:</b>		<b>Number of Toilets:</b> <b>Numero de Inodoros:</b>	
<b>Home Phone:</b> <b>Teléfono:</b>		<b>Work or Daytime Phone:</b> <b>Número durante el día o del trabajo:</b>	
<b>When is the best time to reach you?</b> <b>¿Cuándo es el mejor tiempo para llamarle?</b>	<input type="checkbox"/> Morning <input type="checkbox"/> Mañana	<input type="checkbox"/> Afternoon <input type="checkbox"/> Tarde	<input type="checkbox"/> Evening <input type="checkbox"/> Noche
<b>Applicant Signature:</b> <b>Firma:</b>		<b>Date:</b> <b>Fecha:</b>	

**SECTION 2: MUST BE COMPLETED BY THE OWNER OR OWNER'S AUTHORIZED AGENT** *(please print)*  
**SECCION 2: DEBE SER COMPLETADA POR EL DUENO O PROPIETARIO** *(favor de escribir en molde)*

<b>Name of Owner or Owner's Authorized Agent:</b> <b>Nombre del Dueño o /Agente Autorizado:</b>			
<b>Name of Managing Company (if applicable):</b> <b>Nombre de la Compañía Encargada (si es aplicable):</b>			
<b>Mailing Address:</b> <b>Domicilio:</b>		<b>Unit #:</b> <b># de Unidad:</b>	
<b>City/Zip:</b> <b>Ciudad/Código Postal:</b>		<b>Work or Daytime Phone:</b> <b>Número durante el día o del trabajo:</b>	
<b>Home Phone:</b> <b>Teléfono:</b>		<b>Signature:</b> <b>Firma:</b>	
<b>Signature:</b> <b>Firma:</b>		<b>Date:</b> <b>Fecha:</b>	

By signing this form, the owner or owner's agent and the tenant grant the contractor permission to enter the dwelling unit and to perform or install conservation measures, minor home repair, and/or rehabilitation including but not limited to: low flow toilets repair or replacement of leaky faucets, replacement of showerheads and addition of aerators, and agree to the following:

1. The owner or owner's agent shall not raise the rent of the unit or evict the unit's resident because of the increased value of the unit due solely to the measures provided by the contractor.
2. The owner or owner's agent and the tenant shall retain all applied measures in the residence where installed.

**The contractor agrees to the following:**

1. Shall be responsible for the cost of the measures.
2. Shall ensure that the agency is insured and shall be responsible for damage to unit premises, furnishing, and/or resident(s) that is caused by installation activities.
3. Shall schedule services at the convenience of all parties.
4. Shall assure that the owner, or owner's agent, and tenant data shall be maintained in a confidential manner to assure compliance with the Information Practices Act of 1977, as amended, and the Federal Privacy Act of 1974, as amended.

<b>FOR OFFICE USE ONLY:</b>
DJSN _____ NOTES _____

**Central Coast Energy Services**  
**P.O. Box 2707 Watsonville, CA 95077**  
**Phone: 1-888-728-3637**  
**CA Contractor's License #830815**