



# Release of Payment Authorization Form

Commercial, Multi-Family and Institutional Rebate Programs

This form authorizes the Property Owner or their designee, in a Contra Costa Water District Rebate Program, to release payment of the rebate check to a third party contractor or other designated entity or person. By completing this form, the Property Owner/designee releases their right to receive the rebate. CCWD is not responsible for any disputes the Property Owner/designee may have with third party contractors or other designated entities or persons. This form makes no guarantee that the rebate will be approved and that a rebate check will be issued.

## Water Account Information

Name on Water Account Water Service Provider Water Account Number

Water Service Address (Street, City, State, Zip Code)

Installation Address (Mark "Same" if identical Water Service Address - Street, City, State, Zip Code)

## Applicant Information

I am the:  Property Owner  Authorized Representative of Property Owner

Property Owner Name (Full Name) Rebate Program Name

Authorized Representative of Property Owner (Full Name, if applicable) Title

Your Company/Organization Contact Phone Number Contact Email

## Release of Payment

Note: Entity receiving the rebate check must complete an IRS Form W-9. The Name on the Rebate Check must match the name on the required W-9 Tax Form. Details: [ccwater.com/743](http://ccwater.com/743).

Name of Company/Entity (Who you authorize to receive rebate check) Company/Entity Contact Person

Company/Entity Phone Number Company/Entity Email

Company/Entity Mailing Address (Where rebate check will be sent - Street, City, State, Zip Code)

I certify that all information on this form is true and correct, and that I am the Property Owner or authorized as a representative of the Property Owner to release payment to a third party contractor or other designated entity or person. By signing this form, I am releasing payment of the rebate check to the third party contractor or other designated entity or person listed above. Releasing payment to another entity does not remove my obligation to meet all Rebate Program Terms & Conditions and Program and Product Qualifications (if any), which are available at [www.ccwater.com/Rebates](http://www.ccwater.com/Rebates).

Signature Date

Print Name Title Company

### Return this completed form to:

**Mailing Address:** Contra Costa Water District, Water Conservation, PO Box H2O, Concord, CA 94524

**Email:** [Conserve@ccwater.com](mailto:Conserve@ccwater.com)

**Questions: Call Us at 925-688-8320**

<b>Admin Only</b>
Associated Rebate Application #: _____
W-9 Received _____
Version 6/13/18