City of Ceres
Turf Replacement / Drought Tolerant Landscape
Complete application and mail to:
City of Ceres, Water Conservation Program
2220 Hackett Road
Ceres, CA 95307

PLEASE PRINT CLEARLY:

FIRST & LAST NAME: _____ WATER SERVICE ACCOUNT #: _____

INSTALLATION ADDRESS: _____ PHONE NUMBER: _____

ESTIMATED SQUARE FEET OF IRRIGATED LAWN TO BE REMOVED: _____ LOCATION OF PROJECT: _____

DOES EXISTING LAWN HAVE AN IRRGATION SYSTEM: _____ WILL YOUR CONVERTED AREA HAVE AN IRRGATION SYSTEM: _____

Steps to Participate

Step 1: Read the Program Terms & Conditions to fully understand the program eligibility & rules on the City of Ceres' website under Turf Replacement Program http://www.ci.ceres.ca.us/213.html. Once you have read the terms & conditions sign the application, attach a copy of your most recent water bill, four to five current color photos of the area of turf you're planning to remove, and a sketching of your design to replace turf grass with qualifying plants & materials. Once you have gathered all the required documentation mail to the Water Conservation Program.

Step 2: Once we receive your application we will call you to schedule an appointment for a **"Pre-Qualification Inspection"** site visit with a Water Conservation Program representative. Proceeding with a project prior to receiving authorization from the Water Conservation Program will make the conversion **ineligible for a rebate.**

Step 3: If approved, you will receive notification by phone and given a reservation number to start your project.

Step 4: Perform your lawn / turf replacement project within the time frame listed in terms & conditions (**45 days** from your approval date).

Step 5: Make an appointment for your **"Post-Installation Inspection"** within the time frame and submit all invoices and receipts used for your project to the water conservation representative; who will verify that your project was completed according to the Program's Terms & Conditions. Upon approval, the City will mail you a rebate check.

Check list for final approval

- ☐ **Total Square foot converted _____ Irrigation System Converted ☐ YES ☐ NO (ineligible for rebate)**
- ☐ **Total Square foot of impermeable surfaces** _____
- ☐ **Completed Home Water Audit** _____
- ☐ **Water Wise Plants & Mulch:** _____
- ☐ **Courtesy # _____ Approval # _____ Start date: _____ Project Final _____**

SIGNATURE OF WATER CONSERVATION REPRESENTATIVE: _____ DATE: _____

DISCLAIMER:
The City of Ceres is offering rebates for turf replacement / drought tolerant landscapes to increase water efficiency. **Projects must be approved in advance and the program is not retroactive.** Sales receipts and/or contractor invoices are required for all rebates. Rebates are issued on a first-come, first-served basis until funding is exhausted. I understand that my application will be evaluated and the City is entitled to deny any application that does not meet program requirements. I hereby grant permission to the City of Ceres Water Conservation program to use photographs of my residence and landscaping on the conservation website or in other official conservation printed publications, including turf rebate materials, without further consideration, and I acknowledge the city's right to crop and treat the photograph at its discretion at a later date. I also understand that once these photographs are posted on the city's conservation website, the image can be downloaded by any computer user. Therefore, I agree to defend, indemnify and hold harmless the City of Ceres, all City of Ceres employee, Director, or contractor affiliated with the City of Ceres from any and all claims for loss, liability, expense, suits and damages, including attorney's fees, arising out of or resulting from the installation of irrigation equipment & landscape materials. I agree that all work performed will comply with applicable state and local laws, ordinances and regulations. If you have any questions or concerns, please call the City of Ceres Water Conservation program at **(209) 538-5688** Monday thru Friday, 8:30 am to 5:00 pm.

I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS OF THE REBATE PROGRAM.

SIGNATURE OF APPLICANT: _____ DATE: _____