

SepticSmart Rebate

2020 Claim Form

Property Owner Information

Name(s)				Pre-approval #	SS20_	
Phone Number(s)						
Email Address	If provided, RDN will respond by email					
Property Address	RDN address where work was done		City/Town		Postal Cod	de
Mailing Address	(If different than above)		City/Town		Postal Cod	le
Rebate Claim						
Select all that apply: Maximum Re						num Rebate
Distribution Box Installation or Replacement						\$200
Riser Installation						\$300
Effluent Filter Installation \$100						
Repair or Replace an Aging System (if selected, cannot claim for distribution box, riser, effluent filter) \$600						
BONUS: I attended a 2020 SepticSmart workshop at (location):					\$100	
Acknowledgement						
By signing below, I acknowledge that:						
 I have read the 2020 SepticSmart Rebate Information Sheet (available at www.SepticSmart.ca). I am including a detailed invoice and proof of payment (i.e. receipt) to support my claim. Invoice must show work was completed by an Authorized Person. The Regional District of Nanaimo is not responsible for the performance or maintenance of my septic system. 						
Signature of property owner(s) Date signature			ned (dd/mm/yy)			
Claims must be received before your pre-approval expires and no later than December 11, 2020.						
Email Claim Form to RCU@rdn.bc.ca			DN Use Only		DB	\$
•	n person: Nanaimo, Wastewater Services y Road, Nanaimo, BC, V9T 3Z2		ite approved		RI EF — AS	\$ \$ \$
		Tot	tal Approved	\$	Bonus	\$