

SepticSmart Rebate

2022 Claim Form

Property Owner Information

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Name(s)				Pre-approval #	SS22	
Phone Number(s)						
Email Address	If provided, RDN will respond by email					
Property Address	RDN address where work was done		City/Town		Postal Cod	le
Mailing Address	(If different than above)		City/Town		Postal Cod	le
Rebate Claim						
Select all that apply	<i>/</i> :				Maxim	um 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						
Acknowledgement						
By signing below, I acknowledge that:						
 I have read the 2022 SepticSmart Rebate Information Sheet (available at www.SepticSmart.ca). I am including a copy of 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 o	wner(s)	Date s	gned (dd/mm/yy)			
Claims must be received before your pre-approval expires and no later than December 9, 2022.						
Email Claim Form t	o RCU@rdn.bc.ca		RDN Use Only		DB	\$
Submit by mail or in	n person:				RI	\$
•	Nanaimo, Wastewater Services y Road, Nanaimo, BC, V9T 3Z2	Date approved			EF AS	\$ \$
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