



Georgetown Water Department

Certification of Showerhead Installation

REBATE #: _____

CUSTOMER'S NAME: _____

NEW SHOWERHEAD MANUFACTURER:

NEW SHOWERHEAD MODEL NUMBER:

DATE OF PURCHASE: _____

To assist in evaluating the effectiveness of the rebate program, please provide the following information about the SHOWERHEAD being replaced:

I hereby attest that I replaced a 2.5 gallons per minute showerhead with a new 2.0 gallons (or less) per minute showerhead at the following address currently connected to the Georgetown water service.

ADDRESS OF INSTALLATION: _____

DATE OF INSTALLATION: _____

CUSTOMER SIGNATURE: _____