

Water Bottle Filing Station Grant Program







Up to \$2500 per unit available for the purchase of a water bottle filling station.

This grant program is open to large and small businesses, non-profits, and public agencies within the Tahoe Basin.

TWSA will reimburse 50% of a bottle filler station purchase price.*

*up to \$2500 per unit, purchase price excludes any installation costs.

The TWSA/Tahoe Fund Water Bottle Filling
Station Grant Program was created to
provide the community with access to safe
and reliable Tahoe Tap® water to refill
reusable water bottles.

To be eligible, applicants must:

- Be located in the geographically defined Tahoe Basin.
- Be a public facility (city facility, school, community center, parks, recreation areas, etc.)
 OR
- Be a private facility/business providing public access to fill station during standard business hours.
- Meet criteria and fulfill application requirements.

Program materials and application are posted at: www.TahoeH2O.org

Questions? Contact us at: drinktahoetap@ivgid.org or 775-832-1284

TWSA WILL REIMBURSE 50% OF A STATION'S PURCHASE PRICE – UP TO \$2500 PER UNIT. MAX. = 5 UNITS PER APPLICANT. Subject to funding availability.

Station Examples:

Prices vary; roughly \$700-1500 for an indoor water bottle fill station; surface mounted (plus installation)



Prices vary; roughly \$3000-\$7000 for an outdoor station; surface mounted or freestanding (plus installation).



List of Vendors:

Below is a list of vendors that offer stations that are eligible through this program. This is by no means an exhaustive list:

Western Nevada Supply www.goblueteam.com

Elkay www.elkay.com

Faucet Direct <u>www.FaucetDirect.com</u>
 Global Industries <u>www.GlobalIndustrial.com</u>

• Hydration by Haws <u>www.hawsco.com</u>

Murdock Manufacturing www.murdockmfg.com/water-bottle-filling-station

Plumbing Supply
 Restroom Direct
 www.PlumbingSupply.com
 www.RestroomDirect.com

Applicants must successfully:

1. Submit a grant application request form (prior to installation). Forms at: www.TahoeH2O.org

- 2. Purchase and install the equipment
- 3. Submit proof of installation and payment.*

 *Grant funds will be issued after completion of proof of purchase and installation.

Program Criteria:

- Proposed location may be private or public property, with public access in an area not restricted by a counter or interior door. Public access must be available during normal business hours.
- Model installed must be NSF 61 certified.
- Model must meet ADA compliance on drinking water fountain installation.
- Applicant agrees to pay in full the total project cost, with reimbursement up to \$2500 per unit, issued after successful completion of all application requirements.
- Applicant agrees to allow placement of DRINK TAHOE TAP ®/TAHOE FUND signage at the fill station for user education, and to allow photo opportunities of station.
- Applicant agrees to listing of location on apps and maps, as part of the Tahoe Refill Network.
- If unit installed has a 'bottles avoided counter', applicant agrees to provide count upon request.
- Limit 5 station rebates per entity, per year. Subject to fund availability.
- Rebate applicants agree to assume responsibility for maintaining equipment post-installation, based on standard manufacturer recommendations.
- TWSA/Tahoe Fund reserve the right to request refund of rebate if station is not properly maintained for the first 3 years of installation.
- The applicant agrees that TWSA/Tahoe Fund is not responsible for any costs or issues associated with installation or station maintenance.

Application Requirements:

All application materials are available online at: www.TahoeH2O.org
Submit the following documents for approval PRIOR to purchasing and installing the bottle filling station:

- 1. Completed Application Form
- 2. Entity's Federal W-9 Tax Form
- 3. Liability Waiver Agreement

Once you have received approval from TWSA, purchase and install the water filling station, then submit the following documents for reimbursement:

- 1. Copy of filling station purchase receipt. 50% of cost reimbursable up to \$2500 per unit.
- 2. Photo of installed unit (preferably with placement of Drink Tahoe Tap® and Tahoe Fund signage).

Application Deadline:

Applications will be continuously accepted on a first-come first-served, rolling basis. Grants will be awarded until program funding is exhausted.

Selection Process:

Applications will be reviewed thoroughly for compliance with the application requirements. Incomplete applications will be notified of missing submittal materials.

Other Requirements:

TWSA will provide to the applicant signage for installation at the location of the station. The applicant must install the signage when delivered. TWSA requires a commitment to joint promotional opportunity, including, but not limited to, social media coverage, photography, etc. Requests for multiple installations by an entity will be considered on a case-by-case basis. Payment will be made after submitting proof of successful installation. Awarded funds may ONLY be used towards a water filling station purchase. Project must not have started prior to application approval.

Contact Information:

For questions or concerns about the program, please contact: drinktahoetap@ivgid.org / 775-832-1284

Submit Application Materials to:

Drink Tahoe Tap® Water Bottle Filling Station Grant Program Tahoe Water Suppliers Association 1220 Sweetwater Road, Incline Village, Nevada 89451

<u>Disclaimer</u>

TWSA/TAHOE FUND has the right to reject the proposed unit based on not meeting the required criteria. TWSA/Tahoe Fund is not liable for defects of installation or maintenance issues onsite.



Tahoe Water Suppliers Association/Tahoe Fund Tahoe Tap® Water Bottle Filling Station Program Fill out the following: Grant Request Application, Waiver, Tax ID Forms



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CONTACT INFORM	ATION
Contact Person:	
Phone Number:	Email Address:
Applicant's Legal Entir	ty Name (check payable to):
Mailing Address:	
Installation Address: _	
Federal Tax ID #:	
☐ Public Agency	☐ Private Business ☐ School ☐ Other:
PROJECT INFORMAT	TION
1) Make/Model(s) for	Proposed Purchase/Installation
2) Proposed Installation	on Date
3) Proposed Installatio	on Location (ex. indoor/outdoor, building type).
4) Describe the expos	ure and approximate number of people that pass through the proposed location.
5) Describe your need	, reasoning and interest for a water bottle filling station.
6) Funding Amount Re	equested (up to \$2500 per unit; limit 5 units). Estimated total cost for this project.

OTHER IN	NFORMATION	
APPLICAT	TION CERTIFICATION	
Does vour	agency agree to nay for the installat	tion and maintenance costs associated with the unit?
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, , ,		y authorized by the applicant's governing body to apply for funding from
		nd for the project described in this application. I further attest that the
informatio	n provided in this application is accu	rate to the best of my knowledge.
Authorized	Representative's Signature	Date
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<u>Subm</u>	it applications by mail or email to	<u>2</u> :
Tahoe	e Tap® Water Bottle Filling Statio	n Grant Program Tahoe
	r Suppliers Association / Incline V	_
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	twater Road, Incline Village, Nev	ada 89451 Emaii:
drink	tahoetap@ivgid.org	
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TWSA	A Staff only:	
	oplication Received:	
	taff (initials)	
0	P.P	
0	Federal Tax ID W-9 received	
0	Liability waiver received	
0	Application complete and accepted	
0	Application missing materials:	
	tion active for 90 days (date)	
	Processing:	nhote of installation) received
0	Documentation (proof of payment and Check request submitted on (date)	·
0	File closed	
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TWSA/TF – Drink Tahoe Tap® Filling Station Grant Program



LIABILITY WAIVER AGREEMENT

The Tahoe Water Suppliers' Association / Tahoe Fund (TWSA/Tahoe Fund) have developed a **Drink Tahoe Tap® Water Bottle Filling Station Grant Program** ("Program") to provide members of the community with access to safe and reliable tap water to refill personal, reusable bottles.

TWSA/Tahoe Fund provides these grants for the purchase of a water bottle filling station, to entities withing the Tahoe Basin

TWSA/Tahoe Fund agrees to provide a grant in the agree amounts (on application) for each approved station to:
______("Entity").

The purpose of this grant is for Entity to purchase a water bottle filing station under the terms and conditions of the Program.

TWSA/Tahoe Fund's only involvement in Entity's activities in connection with the Program is to provide grant funds. Subject to availability of funds, TWSA/Tahoe Fund's only obligation to any Entity participating in the Program is to provide the grant amount for the purpose stated. TWSA/Tahoe Fund is not responsible for any liability to any participants in the Program regardless of any liability incurred in connection with the Entity's participation in the Program.

Entity assumes all risk of loss resulting from liability, damage, or injury to any property or person arising from the Program, including all risk of injury to its employees, agents, contractors, students, volunteers, and project participants.

Pursuant to this Waiver of Liability, Entity shall defend, indemnify, and hold harmless TWSA/Tahoe Fund, its Board of Directors, officers, employees, and agents from and against all claims, suits, or causes of action for injury to any person or damage to any property arising out of any intentional or negligent omissions arising out of Entity's participation in the Program.

ACCEPTED: (Entity)	
Signature:	Printed Name:
Date:	Federal ID No:



Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Befor	e y	bu begin. For guidance related to the purpose of Form W-9, see <i>Purpose of Form</i> , below.									
	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the oventity's name on line 2.)	vner's na	me on lin	e 1, a	nd en	ter the	e busi	ness/d	isrega	arded
	2	Business name/disregarded entity name, if different from above.									
on page 3.	3a	only one of the following seven boxes. Individual/sole proprietor C corporation S corporation Partnership Trust/estate				4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
Print or type. Specific Instructions on page	LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. Other (see instructions)			E C	Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)						
P Specific	3b	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions				(Applies to accounts maintained outside the United States.)					
See	5 Address (number, street, and apt. or suite no.). See instructions.				e and address (optional)						
	6	6 City, state, and ZIP code									
	7	List account number(s) here (optional)									
Par	t I	Taxpayer Identification Number (TIN)									
Enter	you	r TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo	oid	Social	secur	ity nu	mber				
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>				-		_					
TIN, la		• • • • • • • • • • • • • • • • • • • •	. u	Or Employ	or ide	antific	ation	num	hor		_
Note: If the account is in more than one name, see the instructions for line 1. See also <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.			-								
Par	Ш	Certification									
Under	ре	nalties of perjury, I certify that:									
2. I ar Ser	n no vice	mber shown on this form is my correct taxpayer identification number (or I am waiting for a st subject to backup withholding because (a) I am exempt from backup withholding, or (b) I at (IRS) that I am subject to backup withholding as a result of a failure to report all interest of the subject to backup withholding; and	have no	ot been i	notifie	d by	the I	ntern			
3. I ar	n a	U.S. citizen or other U.S. person (defined below); and									
4. The	FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	g is corr	ect.							
becau acquis	se y sitio	ion instructions. You must cross out item 2 above if you have been notified by the IRS that you have failed to report all interest and dividends on your tax return. For real estate transaction or abandonment of secured property, cancellation of debt, contributions to an individual ret interest and dividends, you are not required to sign the certification, but you must provide y	ns, item irement	i 2 does arrange	not a ment	pply. (IRA	For n), and	nortga d, ger	age in nerally	teres /, pay	t paid, ments
Sign		Signature of									
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they