



Wireless Rain Sensor Program

Rain sensors – also called rain shut-off devices – are designed to interrupt the cycle of an automatic irrigation system controller when a specific amount of rainfall has occurred. They are small devices connected to the irrigation system controller and mounted in an open area where they are exposed to rainfall. Homeowners will be given a FREE Wireless Rain Sensor to install.

Program Qualifications:

- ____ Active customer of the Town of Dundee
- ____ Home currently has a programmable irrigation system

Steps to Apply:

1. Complete this form and submit it using the information on the PRWC website:
<https://prwcwater.org/water-conservation/rebates-incentives/>
2. The Town will contact the homeowner to pick up the FREE wireless rain sensor at Town Hall.

Applicant Information: Please print clearly

Utility _____ Billing Account # _____

Business Name (if applicable) _____

Last Name _____ First _____ M.I. _____

Street Address _____ Unit # _____

City _____, FL Zip _____ Relationship to property _____

U.S. Phone _____ Email _____

Mailing Address (if different from above) _____

Building Information: Please select

____ Single Family: ____ With HOA ____ Without HOA ____ HOA Common Area

____ Multi-Family/Apt. (# of Units ____)

____ Commercial ____ Other (Explain): _____

Agreement of Term and Conditions

The Utility may deny any application that does not meet program requirements. The undersigned expressly agrees that the Utility may inspect all items submitted for the Wireless Sensor Program. The undersigned further agrees to hold harmless the Utility and/or Polk Regional Water Cooperative against all loss, damage, expense, and liability resulting from the loss, destruction or damage to property arising out of or in any way connected with the installation of the Wireless Rain Sensor Program. The Utility reserves the right to alter this program at any time. Program funding is limited to available resources. For further questions, please call your Utility.

I have read, understand, and agree to the terms and conditions of this program.

Signature of Applicant _____ Date _____

Complete, sign and date this page. Incomplete applications will be denied and returned.

For questions and to submit your application: Beth Robertson, (863) 519-1050, BCRobertson09@ufl.edu