

## **Multi-Residential Water Audit Program Application Form**

Receive a no-cost detailed water audit to learn about your building's water use and how you can save water and money.

These audits will provide tailored recommendations for your individual building and identify projects that could qualify for rebate to save money and water.

### **Qualifications for an audit**

The multi-residential building may qualify for an audit if:

- It is located within the City of Guelph limits and holds an active water account, and
- has 6 suites or more, and
- has an average water demand of at least 130 cubic metres per suite per year

### **Water audit**

The water audit will be conducted by a third party consultant that the City has hired. The consultant will:

- Determine a building's average daily water demand and daily water demand pattern over a 7 day period via data logging to identify unusual demand patterns or indicators of excessive leakage. Further demand modelling may be required at your expense if leaks or anomalies are found.
- Assess a building's process water uses (where applicable), such as automatic irrigation system, water softeners, HVAC units, common laundry facilities, swimming pool make-up water, etc.
- Inspect 6 to 10 suites, or 20 suites in buildings with 100 or more suites, to assess: toilet flush volumes, toilet leakage, overall toilet condition, showerhead flow rate, kitchen and lavatory faucet maximum flow rates, presence or absence of faucet aerators, and overall condition of all water using fixtures and appliances. The information obtained will be used to identify water saving opportunities like reducing leakage and/or fixture and appliance upgrades.

If you have questions or require this application to be provided in an accessible format as per the Accessibility for Ontarians with Disabilities Act, 2005, please call 519-822-1260 extension 2633.

### **Notice of collection**

The personal information on this form is collected pursuant to the Municipal Act, 2001 and in accordance with the Municipal Freedom of Information and Protection

of Privacy Act. This information will be used for the purposes of administration of the City of Guelph rebate programs. Questions regarding this collection should be directed to the City of Guelph Access, Privacy and Records Specialist, City Hall, 1 Carden Street, Guelph ON N1H 3A1 at 519-822-1260 extension 2349.

Complete this application form and mail or email to:

Attention: Multi-Residential Water Audit Program  
City Hall, 1 Carden Street, Guelph, ON N1H 3A1  
[conservation.rebateprograms@guelph.ca](mailto:conservation.rebateprograms@guelph.ca)

For more information visit [guelph.ca/ourstoconserve](http://guelph.ca/ourstoconserve) or call 519-822-1260 extension 2633.

**Applicant information**

Contact name \_\_\_\_\_ Position \_\_\_\_\_

Phone number \_\_\_\_\_ Email address \_\_\_\_\_

Applicant building address (to be audited)  
\_\_\_\_\_

Building Owner contact name \_\_\_\_\_

Building Owner mailing address (if different)  
\_\_\_\_\_

Phone number \_\_\_\_\_

Email address \_\_\_\_\_

Billing account number for the building  
\_\_\_\_\_

Would the audit be scheduled through an additional person other than the contact above? If so, please provide his/her contact information below.

Name \_\_\_\_\_

Phone number \_\_\_\_\_

Email address (optional) \_\_\_\_\_

Are you interested in having your units Blue Built Home certified?  Yes  No

The building I wish to audit is a:

**Rental building**

**Unit owned (condominium)**

If condominium, who is the:

primary contact name \_\_\_\_\_

phone number \_\_\_\_\_

email address: \_\_\_\_\_

**1.** What is the month and year that you purchased this property?  
\_\_\_\_\_

**2.** How many units/suites are in the building? \_\_\_\_\_

**3.** Are the units individually billed?

Yes

No

Don't Know

**4.** Provide number of persons per unit/suite? If not know, provide approximate  
\_\_\_\_\_

**5.** Does the building have any 13L toilets or larger (buildings constructed prior to 1996 typically had 13L toilets installed)?

Yes

No

Don't Know

If "Yes", approximately how many? \_\_\_\_\_

**6.** Does the building have any 6L toilets (buildings constructed after 1996 typically had 6L toilets installed, or toilets have been replaced in older buildings)?

- Yes
- No
- Don't Know

If "Yes", approximately how many? \_\_\_\_\_

**7.** Have any toilets in the building been replaced since construction? If so, how many? \_\_\_\_\_

**8.** Does the building have water efficient showerheads and aerators?

- Yes
- No
- Don't Know

If "Yes", approximately how many? \_\_\_\_\_

**9.** Does the building have any known water leaks?

- Yes
- No
- Don't Know

If yes, where are they located? \_\_\_\_\_

**10.** Does the building have any sub-meters (additional water meters downstream of building's main billing water meter)?

- Yes
- No
- Don't Know

If "Yes", which components are sub-metered (check all that may apply):

- Irrigation system
- Swimming pool
- HVAC system
- Individual units/suites
- Groups of units/suites

**11.** Does the building have a central air conditioning HVAC unit? Chilled loop/Cooling towers?

- Yes
- No
- Don't Know

**12.** Does the building have a central boiler system?

- Yes
- No
- Don't Know

**13.** Does the building have a manually operated landscape sprinkler system or an automatic in-ground irrigation system?

- Yes
- No
- Don't Know

**14.** Does the building have a swimming pool?

- Yes
- No
- Don't Know

If "Yes", the pool is:

- indoor
- outdoor

**15.** Does the building have an engineer onsite or one that visits on a routine basis?

- Yes
- No
- Don't Know

**16.** Does the building have a water softener(s)?

- Yes
- No
- Don't Know

**17.** Does the building have:

- in-suite laundry facilities
- in-suite hot water tanks
- on demand hot water recirculation system(s) or timed
- centralized laundry
- no laundry facilities on site

**18.** What percentage of your building's occupancy is transient throughout the year (students, seniors that move south during the winter, etc.)? \_\_\_\_\_

I have read, understand and agree to the terms and conditions of the Multi-Residential Audit Program.

Signature \_\_\_\_\_

Date \_\_\_\_\_ (yyyy/mm/dd)

Please submit the application with the original signature.