

ORANGE COUNTY SANITATION DISTRICT (OC San)

CLAIM FORM FOR REFUND, REBATE, OR REDUCED CHARGE

1. Property Information

Assessor's Parcel Number APN (separate claim by parcel): _____

Property Address: _____

2. Owner Information (all fields must be complete)

Owner Name: _____

Mailing Address: _____

Contact Name: _____

E-mail Address: _____ Telephone Number: _____

3. Refund Basis or Correction

Refund due to error in use category, square footage, units, or clerical error **(not applicable for a water efficiency rebate/reduced charge)**:

Check box(es) for fiscal year: 2020-21 2021-22 2022-23 2023-24

Describe Error: _____

4. Rebate (Claim based on water usage)

Rebate or Reduced Charge (Reduced charge deadline is October 31st - see instructions for additional information):

Check box(es) for fiscal year: 2022-23 2023-24

5. Description of Improvements

Business Name(s): _____

Business Description (Not County Use Codes): _____
(Restaurant, Retail, Distribution/Warehouse, Light Industrial/Manufacturing, Shopping Center, etc.)

If multiple tenant building(s), attach tenant list including business name, address, square footage, and business description.

6. Water Account Information (Rebate / Reduction only). Review Refund, Rebate, Reduced Charge Program Guidelines for additional information.

List total number (#) of water meters and account numbers servicing all buildings located on the parcel. If the water account is in a tenant's name, water must be obtained by the submitter and included below **(ALL water accounts must be included, or the claim may be denied)**:

_____ Commercial, Industrial, Domestic meter(s)

Account Numbers: _____

_____ Fire line meter(s)

Account Numbers: _____

_____ Irrigation, landscape meter(s) **(Must include common area irrigation meter(s) for multiple parcels that share an irrigation meter)**

Account Numbers: _____

7. Certification

I hereby certify under penalty of perjury under the laws of the State of California that:

1. I am the owner or authorized to sign this application on behalf of the owner.
2. All information contained in this application and attached to this application is true and correct.
3. The service charge sought to be refunded or rebated was paid or that if the service charge is unpaid, an adjustment is sought against the unpaid service charge.
4. I understand corrections made by OC San may decrease or increase service charges.
5. If acting on behalf of an organization, I am duly authorized to act on its behalf.
6. I understand the refund/rebate will be payable to the payor of the applicable property taxes.
7. In exchange for OC San processing of this application, the undersigned applicant agrees to defend, indemnify, and hold harmless OC San, its agents, officers, or employees, against any legal claim, action, or proceeding arising out of or relating to the application.

Signature of Owner (or authorized rep.)

Company Name

Date

Print Name/Title

Email Address

Tel. No.

THIS FORM MUST BE SIGNED BY THE PROPERTY OWNER, HIS OR HER GUARDIAN, EXECUTOR OR ADMINISTRATOR AND RETURNED ALONG WITH REQUIRED DOCUMENTATION. SEE PAGE 3 FOR FURTHER DETAILS.

If the Owner is not a natural person, proof of authority to sign must be submitted to OC San together with this form. Property Management Company must attach the OC San Affidavit. The information provided is subject to verification with the parcel owner.

By executing this form, you are authorizing OC San to access your water consumption information from the water service provider.

This form MUST be notarized if executed outside of the State of California

ORIGINAL SIGNATURE OR **CERTIFIED ELECTRONIC SIGNATURE** REQUIRED

INSTRUCTIONS FOR FILING A CLAIM FOR REFUND, REBATE OR REDUCED CHARGE

General Instructions (Do NOT staple documents):

- Complete all fields and sign claim form.
- A copy of the secured property tax bill(s) showing owner information must be included for the year(s) that the refund or rebate is sought.
- Copies of water bills or a printed copy of verifiable water consumption history (see guidelines) from the water agency must be submitted if a water efficiency rebate is requested. The water bills or consumption history must cover the entire fiscal year (July 1st-June 30th) that is requested to be reviewed.
- The County of Orange Auditor Controller charges a \$15 processing fee to adjust the OC San Sewer User Fee. The processing fee will be deducted from the adjusted amount.
- Shopping centers, medical centers, and adjacent parcels with shared water meters are considered Assessment Units and must be submitted as a unit in one claim packet.
- Mail claim forms with original signatures and required documentation to:

**Financial Management Division
Orange County Sanitation District
10844 Ellis Avenue
Fountain Valley, CA 92708-7018**

If you have any questions, please call (714) 593-7281.

Instructions for each section of form:

1. Assessor's Parcel Number and property address can be obtained from the secured property tax bill. A separate claim packet is required for each parcel unless a water meter is shared between buildings located on separate parcels).
2. Owner's Name, mailing address, phone number, contact name, and email address of the Owner of Record.
3. Check the box(es) for fiscal year(s) that you are applying for:
Refund – only applicable if the use category, square footage, or number of units is incorrect.
4. Check the box(es) for fiscal year(s) that you are applying for.
12 months of water must be included.
A reduced charge claim is for a current fiscal year adjustment. The claim must be postmarked by October 31st. If the claim is not postmarked by the deadline, actual water must be submitted for the current fiscal year (July through June).

*Per Ordinance OC SAN-58, rebates can be filed for current year and prior year. See ordinance for further information. (See program guidelines at www.ocsan.gov).
5. List Business name and business description. If multiple tenants, tenant list must be included.
6. List the number of each type of water meter along with the corresponding account numbers if filing a rebate claim. **Common area irrigation meters must be included in the claim packet.**
7. Claim form must be signed by the owner or authorized signor. If the signor is not a natural person, proof of authority must be included in the claim packet. Please see Proof of Authority for acceptable documentation.