Department of Water, County of Kauai
Low Flow Fixture Data Form

Date: _____ **Name:** _____

Address: (please provide a street address)

_____
Street Number Street Name Town Zip Code

Phone Number: _____ **Account Number:** _____

Please indicate quantity (Limit two per household):

#_____ Toilet Leak Detection Tablets	N3140
#_____ Low Flow Showerhead(s)	N29295B
#_____ Kitchen Aerator	N3115V
#_____ Bathroom Aerator	TS-100
#_____ * Indoor Water Conservation Kit	
Contains:	
1 Low Flow Massage Showerhead	N29295V
1 Dual Setting Swivel Kitchen Aerator	N3115
1 Toilet Displacement Bag	N3137
1 pkg Leak Detection Tablets	N3140
1 Shower Timer	N2145
#_____ * Outdoor Water Conservation Kit	
Contains:	
1 2-Gallon Car Wash Bucket	N3187
1 Garden Hose Nozzle	N2158
1 Hose Washer with Plastic Screen &	
1 Male & Female Hose End Repair Kit	N2169

**** Not Included As Free Items***

In my house, I have: (please indicate how many)

#_____ Showers	#_____ Toilets	
#_____ Bathroom Sinks	#_____ Bathrooms	
#_____ Kitchen Sinks	#_____ Laundry Sinks	
#_____ Hose Bibs	#_____ Bar Sinks	
	#_____ Work-Room Sinks	
	#_____ Clothes Washers	
	#_____ Dishwashers	
	#_____ Pools	
	#_____ Jacuzzis	
	#_____ Refrigerators	
	#_____ Ice Machines	
	#_____ Air Conditioners	

I (circle one) **DO / DO NOT** irrigate my yard.
_____ Acres Irrigated

Additional water uses besides those listed here: _____

_____

I (circle one) **HAVE / HAVE NOT** received free flow fixtures in the past:

(check one)	Type of Fixture	# Received
☐ DOW Office	_____	_____
☐ Kauai Electric	_____	_____
☐ Other _____	_____	_____

If you have any questions regarding fixtures, or experience any problems with the fixtures, or if you would like additional water conservation tips and ideas, please call the Public Relations Specialist at 808-245-5455.

If you would like to share some of your water conservation ideas, and suggestions with others, please write them here. We will post your ideas and suggestions on our website to share with everyone.