

# Turf SWAP Rebate Application



Funds are distributed on a first come basis to applicants that have met all program criteria, with a maximum of \$1,500 while funds are available. Rebates will be received as a check from Alachua County, which requires submission of a completed W-9 form for tax purposes. Call 352-264-6800 prior to conducting work to make sure you understand all criteria (you are not guaranteed payment if criteria are not met). Checks may take 4-6 weeks.

1. Contact Name: \_\_\_\_\_  
Contact Email Address: \_\_\_\_\_ Contact Number: \_\_\_\_\_  
Best way to contact (check one):  Email  Phone
2. Business Name (for non-residential rebates): \_\_\_\_\_
3. Property Street Address: \_\_\_\_\_  
Property City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Neighborhood: \_\_\_\_\_ HOA name if applicable: \_\_\_\_\_
4. Water source (check one):  Well  Reclaimed  Lake  City/Utility  Unknown
5. How often are fertilizers applied to your yard annually?  0  1  2  3  4  5 OR MORE
6. Location(s) of Turf SWAP area on lot (east side, west side of back yard, etc.):  
\_\_\_\_\_  
\_\_\_\_\_
7. Name(s) of SWAP Shop(s): \_\_\_\_\_
8.  By checking this box, I verify that high volume irrigated areas were replaced with Florida Friendly Landscaping™. (if applicable)
9.  By checking this box, I verify that I am willing to meet with a member of the SWAP Team (Master Gardeners or Alachua County staff) to discuss taking care of my new landscape.
10.  By checking this box, I verify that I have submitted the itemized invoice from a Florida Water Star Accredited Professional(s) for only Turf SWAP eligible work and have met all applicable permit conditions and HOA rules and regulations.
11. Cost of Turf SWAP work indicated on attached invoice: \_\_\_\_\_ (contingent on staff review)

Please submit this form, rebate invoice form, and a completed W-9 form to:  
Alachua County Environmental Protection Department by:  
Mail: 408 W. University Ave, suite 106, Gainesville, FL 32601 or  
Fax: 352-264-6852 or Email: [hgreer@AlachuaCounty.us](mailto:hgreer@AlachuaCounty.us)

**Staff Use Only:** Date Received: \_\_\_\_\_ Amount rebated: \_\_\_\_\_ Verified by: \_\_\_\_\_