



Community Conservation Challenge

Organization/Team Application

Application Deadline is Friday, May 1, 2009

Organization/Team Information

Name of organization: _____

Address: _____

Mailing address (if different): _____

Telephone: _____ Email address: _____

Contact person (aka Team Leader): _____ Title: _____

Phone (day): _____ (evening): _____ (cell): _____

Email: _____ Best way to reach: _____

Alternative contact: _____ Title: _____

Phone (day): _____ (evening): _____ (cell): _____

Email: _____ Best way to reach: _____

Approx # of Concord members in organization: _____ Tax ID # _____

List three dates/times when Concord Water staff can conduct a presentation to your group about the Challenge:

1) _____ 2) _____ 3) _____

Commitment *(please initial)* My organization:

_____ Agrees to sign a Statement of Services with the Town.

_____ Commits to promoting participation in the Challenge to members.

_____ Commits to promoting water conservation opportunities to organization members.

_____ Allows the Town to assign water customers not affiliated with the organization to the organization's team.

_____ Understands the Community Conservation Challenge Guidelines for Organizations/Teams.

_____ *(signature)*

_____ *(date)*

Mail to: Joanne Bissetta, CPW, 135 Keyes Road, Concord, MA 01742



CONCORD PUBLIC WORKS
Water and Sewer Division
135 Keyes Road
Concord, MA 01742
978-318-3250

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