

## General Information

**Manufacturer Name on Partnership Agreement \***

### Contact Name(s)

Please provide U.S. contacts if possible. This information is for internal use only; WaterSense will not share contact information.

**Name \***

**Email \***

**Telephone \***

**Contact Type \***  To select multiple options: - Using Windows, hold Ctrl key and select

- Primary Contact
- Reporting
- Technical

multiple options with mouse. - Using a Mac, hold Command key and select multiple options with mouse.

**Contact Update? \***

**Name**

**Email**

**Telephone**

**Contact Type**

- Primary Contact
- Reporting
- Technical

**Contact Update? \***

Please update your [interests and preferences](#) to receive more specific communications from WaterSense.

## WaterSense Labeled Product Availability and Program Feedback

Information on WaterSense's impact on the marketplace is vital to the continued success of the program. Please provide data on product availability and promotion.

**1a. Are you promoting your WaterSense labeled products to consumers or other stakeholders? \***  Yes

No

**1b. Please estimate the number of consumers reached in 2012 (e.g., through circulars, via the Web, etc.) \***

Please enter a number without commas.

**1c. Please indicate how you are promoting your WaterSense labeled products. \***

To select multiple options: - Using Windows, hold Ctrl key and select

- On product packaging
- On the product itself
- Brochures and other marketing materials

multiple options with mouse. - Using a Mac, hold Command key and select multiple options with mouse.

**Other description \***

**1d. Do you mention WaterSense or include the WaterSense promotional label or partner logo on your:**

To select multiple options: - Using Windows, hold Ctrl key and select multiple options

- Print advertising
- Broadcast advertising
- Web advertising

with mouse. - Using a Mac, hold Command key and select multiple options with mouse.

**1e. Are you working with retailers and/or distributors to promote your WaterSense labeled products? \***

Yes  No

**Which retailers/distributors are you working with?**

**2. Did your company participate in any WaterSense promotional campaigns last year? \***

|                            |   |
|----------------------------|---|
| Please select...           | ▲ |
| Fix a Leak Week 2012       | ■ |
| We're for Water            | ■ |
| Peak water season outreach | ▼ |

To select multiple options: - Using Windows, hold Ctrl key and select

multiple options with mouse. - Using a Mac, hold Command key and select multiple options with mouse.

**Other description \***

**Please elaborate on your company's participation \***

**3. Where can consumers find your WaterSense labeled products?**

**Markets (e.g., city, state, or region) \***

**Retailer/distributor company names \***

**4. On a scale of 1 to 5 (5 = most valuable), how valuable do you find the WaterSense program? \***

**How has the WaterSense label added value? \***

**5. On a scale of 1 to 5 (5 = most valuable), how valuable do you find the WaterSense partner website? \*\***

**6. In the past year, how often have you visited the WaterSense partner website?\***

**7. Please provide suggestions for improving the WaterSense program (e.g., general tools/materials, webinar topics, communications, Helpline, websites etc.) \***

On the following page, you will be asked to review your responses. **You must select "confirm" at the bottom of the following page to submit the online portion of your Annual Reporting Form to WaterSense.** You will then be automatically directed to instructions for accessing an interactive PDF form to submit your product shipment data in accordance with our confidential business information procedures.

Please note that you may need to try different printer settings or print as a PDF to print the full online report for your records. We apologize for any inconvenience.

**Your Annual Reporting Form will not be complete until WaterSense receives both your online and hard copy reporting forms.**

[Need assistance with this form?](#)

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EPA Form Number 6100-09. The public reporting and record keeping burden for this collection of information is estimated to average three hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Avenue, NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.