

Water Conservation Alliance Guidelines

Please check all appropriate boxes; complete reverse side, detach and forward to SCWA Headquarters.

Self Serve:

- ☐ All Spot-free reverse osmosis reject water (if used) must be recycled.
- ☐ All towel ringers (if applicable) must have a positive shut-off valve.
- ☐ Spray nozzles must be replaced annually.
- ☐ Toilets (if applicable) must be ultra low flow 1.6 gallon per flush type.
- ☐ No visible water leaks.
- ☐ Drought tolerant landscaping or drip system.
- ☐ Main water shut off valve in proper working order.

Conveyor/Express:

- ☐ Must have a recycling system in place OR limit water consumption to an average of 35 gallons per car.
- ☐ All spot-free reverse osmosis reject water (if used) must be recycled.
- ☐ All towel washing systems must have an automatic high level automatic shut off system. (if used)
- ☐ No visible water leaks.
- ☐ Toilets must be ultra low flow 1.6 gallon per flush type.
- ☐ Drought tolerant landscaping or drip system.
- ☐ Main water shut off valve in proper working order.

In-Bay Automatic:

- ☐ Must have a recycling system in place OR limit water consumption to an average of 55 gallons per car.
- ☐ Where applicable, a 5 second dwell time should be created before the customer's vehicle exits the bay to enable water to run-off the vehicle into the bay collection pit.
- ☐ Underbody, Rocker Panel and wheel wash cycles must be re-nozzled and/or calibrated to use no more than 12 gallons per wash cycle.
- ☐ All spot-free reverse osmosis reject water (if used) must be recycled.
- ☐ No visible water leaks.
- ☐ Toilets must be ultra low flow 1.6 gallon per flush type.
- ☐ Drought tolerant landscaping or drip system.
- ☐ Main water shut off valve in proper working order.

Additionally:

- ☐ I agree to participate in the
SCWA Charity Car Wash Program

Signature (I agree above information to be true and correct)



Car Wash/Firm Name: _____

DBA: _____

Owner/Contact Name (please list SCWA member name): _____

Preferred E-Mail (used only by SCWA): _____

Web Site: _____

Preferred Mailing Address (please correct or complete): ☐ Home Address -Or- ☐ Work Address

Address: _____

City, State Zip: _____

Phone: _____

Fax: _____

Type of Wash: ☐ Conveyor ☐ Express ☐ Self Serve ☐ Roll-over/In-Bay Automatic

SCWA
ALLIANCE
PARTNER
APPLICATION

Mail to: SCWA, 4600 Spicewood Springs Road, Suite 103, Austin, Texas 78759, (800) 440-0644, www.swcarwash.org