



Residential Energy Efficiency Rebate Programs

Customer to complete the following (Please print)

- Dishwasher
- Clothes Washer
- Refrigerator
- Room Air Conditioner

CUSTOMER INFORMATION

Customer Name: _____ Account Number: _____
(As it appears on Your Bill)

Address where appliances are installed: _____
Unit Number Street City Zip

Mailing Address if different from above: _____
Unit Number Street City Zip

Home Phone: _____ Work Phone: _____

Email Address: _____

PROPERTY INFORMATION

Property Occupied by: Owner Tenant Year Built: _____
Property Type: Single Family Town House/Condominium

REBATE PRODUCT INFORMATION

Please refer to applicable rebate program catalog for specific requirements, unit measure and rebate per unit. Along with your application, please attach product specification sheet, proof of purchase and installation and an Investment level audit report if available.

Product Name	Manufacturer	Model #	Unit Measure (Fixtures, HP, Kwh)	Number of Units

Total Energy Efficiency Measure Cost: _____ Total Project Cost: _____

CUSTOMER SIGNATURE

I have read and understood the terms and conditions of the Commercial Energy Efficiency Rebate Program. I certify that the information that I have provided is true and correct and the product(s) and/or equipment for which I am requesting a rebate meets the applicable program requirements.

Customer Name (Please Print)

Signature

Date (DD/MM/YEAR)