

I.D. NUMBER _____

SECTION 1 REBATE RECIPIENT INFORMATION	SECTION 2 SERVICE ADDRESS INFORMATION
NAME _____	LOCATION _____
MAILING ADDRESS _____	_____
CITY _____	_____
STATE _____ ZIP _____	SERVICE ACCOUNT # _____
PHONE _____	_____

SECTION 3 TYPE OF REBATE	
FIELD INSPECTION DATE _____	
APPLIANCE INSTALLED: <input type="checkbox"/> HEAT PUMP <input type="checkbox"/> WATER HEATER	
PROPERTY TYPE : <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> SINGLE FAMILY	
<input type="checkbox"/> BUSINESS <input type="checkbox"/> EXISTING CONSTRUCTION <input type="checkbox"/> OTHER	

HEATING/COOLING SYSTEM	REBATE AMOUNT VARIABLE SEE PROGRAM DESCRIPTION*
EXISTING TYPE OF HEATING SYSTEM REPLACED? _____	NEW MANUFACTURER _____
NEW HEAT PUMP SEER RATING _____	NEW AIR HANDLER MODEL # _____
NEW HEAT PUMP SIZE IN TONS _____	NEW ODU MODEL # _____
AHRI REFERENCE # _____	NEW COIL MODEL# _____

SECTION 4 PAYEE TAX INFORMATION	
Tax Status: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> Exempt {Tax exempt, non-profit}	
Tax ID number: <input type="checkbox"/> EIN <input type="checkbox"/> Federal Tax ID <input type="checkbox"/> SSN _____	
Tax Liability: Rebates are taxable if greater than \$600 for business customers, and will be reported to the IRS unless you are exempt. ElectriCities of NC, Inc. will report your rebate as income to you on the IRS Form 1099 unless you have checked "Corporation" or "Exempt" tax status above. You are urged to consult your tax advisor concerning the taxability of rebates. ElectriCities of NC, Inc. is not responsible for any taxes that may be imposed on your business as a result of receipt of	

SECTION 5 Contractor Information		
Company Name	Contact Name/Title	Business Phone

I certify that all equipment information is accurate. I have read and understand all information and qualification standards and understand that ElectriCities may verify all information that I have provided.

Contractor Signature _____ Date _____

SECTION 6 Customer Acceptance of Terms	
I certify that I have read and understand all information and qualification standards for the High Efficiency Heat Pump Rebate Program. I attest that all information is correct. I agree to the verification of the sales transaction, and all information submitted above and to the inspection of the equipment installation by ElectriCities of NC, Inc.	
Customer Signature _____ Date _____	

Rebates will not be paid for incomplete applications. Did you:	
<input type="checkbox"/> Include a copy of dated sales invoice?	<input type="checkbox"/> Include manufacturer documentation of efficiency ratings, if required?
<input type="checkbox"/> Sign and date the application?	<input type="checkbox"/> Fill in equipment, customer and contractor information?
<input type="checkbox"/> Have your contractor sign and date the application?	<input type="checkbox"/> Include your service account number?
<input type="checkbox"/> Retain copies of all paperwork for your records?	

For Office use only			
Date Received _____	Date Approved _____	Rebate Amount(\$) _____	Authorized Signature _____