# CITY OF NEWTON

## Rebate Request Form

Hometown Green
Generating Smart Energy Choices

***CITY/TOWN***_____ ***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: ❑ HEAT PUMP ❑ WATER HEATER

PROPERTY TYPE : ❑ RESIDENTIAL ❑ NEW CONSTRUCTION ❑ SINGLE FAMILY

❑ BUSINESS ❑ EXISTING CONSTRUCTION ❑ OTHER

***WATER HEATER*** **REBATE AMOUNT $150 PER UNIT** **63 1243 1000**

| EXISTING TYPE OF WATER HEATER REPLACED? | NEW WATER HEATER KW_____ |
|---|---|
| ❑ ELECTRIC ❑ LP GAS | |
| ❑ NAT GAS ❑ OTHER | NEW WATER HEATER GALLONS_____ |

***HEATING/COOLING SYSTEM*** **REBATE AMOUNT $400 PER UNIT** **63 1243 2000**

| 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** **BUSINESS PAYEE TAX INFORMATION**

**Tax Status:** ❑ Corporation ❑ Partnership ❑ Individual/Sole Proprietor ❑ Exempt {Tax exempt, non-profit}

**Tax ID number**: ❑ EIN ❑ Federal Tax ID ❑ SSN _____

**Tax Liability**: Rebates are taxable if greater than $600 for business customers, and will be reported to the IRS unless you are exempt. City will report your rebate as income to you on the IRS Form 1099 unless you have checked "Corporation" or "Exempt" tax

**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.

Customer Signature_____ Date_____

***Rebates will not be paid for incomplete applications. Did you:***

❑ Include a copy of dated sales invoice?

❑ Include manufacturer documentation of efficiency ratings, if required?

❑ Sign and date the application?

❑ Fill in equipment, customer and contractor information?

❑ Have your contractor sign and date the application?

❑ Include your service account number?

❑ Retain copies of all paperwork for your records?

***For Office use only***

Date Received_____ Date Approved_____ Rebate Amount($)_____ Authorized Signature_____