



City Rebate # \_\_\_\_\_

**HEAT PUMP REBATE APPLICATION**

SECTION 1	REBATE RECIPIENT INFORMATION	SECTION 2	SERVICE ADDRESS INFO.
Name			
Mailing Address		Service Address	
City			
State		City of Concord	
Zip		Service Acct. #	
Phone			

SECTION 3	NEW HEAT PUMP SYSTEM INFORMATION		
Type of Heating System Being Replaced		Heat Pump Manufacturer	
Heat Pump SEER Rating		Air Handler Model #	
Heat Pump Size in Tons		Outdoor Unit Model #	
AHRI Reference #		Coil Model #	

SECTION 4	CONTRACTOR INFORMATION	
Contractor Company Name	Contractor Contact Name & Title	Contractor Business Phone #

I certify that all equipment information is accurate. I have read and understand all information and qualification standards and understand that the City of Concord may verify all information that I have provided.

Contractor Signature \_\_\_\_\_ Date \_\_\_\_\_

SECTION 5	CUSTOMER ACCEPTANCE OF TERMS
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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, all information submitted above and to the inspection of the equipment installation by the City of Concord.

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

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

- Sign and date the application?
- Include your City of Concord service account #?
- Fill in customer, equipment and contractor information?
- Include a copy of the AHRI Certificate of Product Ratings?
- Include a copy of the dated sales invoice?
- Have your contractor sign & date the application?
- Retain copies of all paperwork for your records?

SECTION 6	CITY ELECTRIC DEPARTMENT FIELD VERIFICATION
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- Residential New Construction       Residential Existing Construction

I certify, I have verified, that the installation of the heat pump matches the information on this rebate form.

City of Concord Electric Department \_\_\_\_\_ Date \_\_\_\_\_

SECTION 7	FOR OFFICE USE ONLY
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Date received      Date Approved      Rebate Amount (\$)      Authorized Signature