

All rebate applications are due by January 15th the year after equipment purchase and installation.

1 EPE CUSTOMER INFORMATION

In order to be eligible for rebates, rebate forms may be completed online or mailed along with a copy of receipt or contractor invoice to the address below.

Rebate processing takes approximately 4-6 weeks. Terms and conditions subject to change without notice.

EPESaver Rebate Center
1515 S Capital of Texas Hwy,
Suite 110
Austin, TX 78746
www.epesaver.com

* Rebate check will be made out to landlord if entered

** Rebate check will be mailed to the account address unless a different mailing address is provided

EPE Account Number for Install Location: (10 digits)

Customer/Resident Name:

Owner/Landlord Name: (if renter occupied)*

Telephone: Applicant's E-mail:

Account Address:

City: State: ZIP:

Mailing Address: (if different)**

City: State: ZIP:

Property Type: Single Family Duplex Condominium Mobile Home Apartment
(Check one)

Check one: Owner Occupied Renter Occupied Vacant

Estimated Annual Gross \$0-\$24,980 \$24,981-\$33,820 \$33,821-\$42,660

Household Income: (Check one) \$42,661-\$51,500 \$51,501-\$60,340 \$60,341-\$69,180
 \$69,180-\$78,020 \$78,021-\$86,860 \$86,861 or greater

Number of Occupants in Home:

Home Characteristics

Please provide photo of heating system nameplate for homes with Electric Resistance or Heat Pump heating

Year Cooling Equipment Installed:

Existing Cooling Type: (Check one) Refrigerated Air Evaporative Cooling None

Existing Heating Type: (Check one) Gas Electric Resistance Heat Pump None

2 INSTALLATION INFORMATION (Must complete all fields)

Evaporative Cooling

Please provide photo of installed system nameplate or include system model # on invoice

Project Completion Date:

Manufacturer	Model Trade or Brand Name	Model #	Serial #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Refrigerated Cooling

Please provide photo of installed system nameplate(s) or include system model #(s) on invoice

+ Look up AHRI certificate at www.ahridirectory.org

Project Completion Date:

AHRI Reference #: SEER Rating: EER Rating:

HSPF/COP Rating: (Heat Pump Only) Capacity of installed system: BTU/Hr

System Type: (Check one) Split AC Pack AC Split HP Pack HP GSHP

	Manufacturer	Model #	Serial #
Outdoor Condenser	<input type="text"/>	<input type="text"/>	<input type="text"/>
Indoor Coil	<input type="text"/>	<input type="text"/>	<input type="text"/>
Indoor Furnace/Air Handler	<input type="text"/>	<input type="text"/>	<input type="text"/>

2019 Evaporative & Refrigerated Cooling Rebates

APPLICATION FORM



3 CONTRACTOR INFORMATION

Company Name:	<input type="text"/>	License #: (if applicable)	<input type="text"/>
Contact Person:	<input type="text"/>	Phone:	<input type="text"/>

4 APPLICANT ACKNOWLEDGEMENT

Please refer to EPESaver.com for additional information regarding eligibility criteria
(Signed by EPE customer if owner occupied or landlord if renter occupied)

By signing below, I acknowledge that: (1) the infiltration work listed herein have been installed to my satisfaction; (2) if contacted by EPE or Frontier Energy, I agree to allow access to my property to inspect the infiltration work; (3) neither EPE nor Frontier Energy assumes any liability whatsoever relating to the infiltration work installed, their installation or performance; (4) all information provided in this rebate form is accurate to the best of my knowledge and (5) **I acknowledge that the project would not have been accomplished or would have been completed with a lower level of efficiency without the assistance of the EPE Energy Efficiency Program.**

Applicant Signature:	<input type="text"/>	Date:	<input type="text"/>
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5 PAYMENT RELEASE AUTHORIZATION

OPTIONAL
(Property owner must complete and sign only if rebate is to be issued to contractor)

By signing below, I am authorizing the payment of the rebate to the contractor (named below), and I understand that I will **NOT** be receiving the incentive payment from El Paso Electric.

Applicant Signature:	<input type="text"/>	Date:	<input type="text"/>
Contractor Company Name: (for payment)	<input type="text"/>		
Mailing Address:	<input type="text"/>		
City:	<input type="text"/>	State:	<input type="text"/>
		ZIP:	<input type="text"/>