

2019 Air Infiltration Rebates

APPLICATION FORM



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

EPE Account Number for Install Location: (10 digits)

Customer/Business Name:

Telephone: Applicant's Email*:

Account Address:

City: State: ZIP:

Mailing Address: (if different)**

City: State: ZIP:

* Email rebate correspondence will be sent to the email address specified in this field
** Rebate check will be mailed to the account address unless a different mailing address is provided

2 INSTALLATION INFORMATION (Must complete all fields)

Weather Stripping and Door Sweeps

Pre-retrofit gap width must be verified by providing photo evidence of the gap measurement

Cooling Type: (Check one) Split/Pack. AC Split/Pack. HP Air-Cooled Chiller
 Water-Cooled Chiller Evaporative Cooler None

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

Length of Installed Weather Stripping or Door Sweep by gap width:

1/8"	1/4"	1/2"	3/4"
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Refrigerated Door Gaskets

Length of Installed Door Gasket (ft) for Walk-in or Reach-in Cooler:

Length of Installed Door Gasket (ft) for Walk-in or Reach-in Freezer:

3 CONTRACTOR INFORMATION

Company Name: License #: (if applicable)

Contact Person: Phone:

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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 measure installation listed herein has been installed to my satisfaction; (2) if contacted by EPE or Frontier Energy, I agree to allow access to my property to inspect the measure installation; (3) neither EPE nor Frontier Energy assumes any liability whatsoever relating to the measure 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:

Date:

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:

Date:

Contractor Company Name: (for payment)

Mailing Address:

City:

State:

ZIP: