## **New Mexico Commercial 2022 HVAC Controls Rebates**

**APPLICATION FORM** 



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

EPE CUSTOMER INFORMATION

1

	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:
	Existing HVAC Controls Present: (Check one) Yes No
	Existing HVAC Controls Fresent. (Check one)
CS	Cooling Type: (Check one) Refrigerated Air Evaporative Cooling None
em tric	Heating Type: (Check one) Gas Electric Resistance Heat Pump None

## **INSTALLATION INFORMATION (Must complete all fields)** 2

	Project cost from invoices/receipts: \$
Guest Room Energy Management Please provide copy of manufacturer spec sheet for installed control	Building Type: (Check one)Hotel/MotelDormitorySchoolControl Manufacturer:
HVAC Variable Frequency Drives	Equipment Type: (Check one)   Supply Fan   Return Fan   Cooling Water Pump     Hot Water Pump   WSHP Circulation Pump   Cooling Tower Fan
Please provide VFD spec sheet and an inventory of affected HVAC equipment	VFD Horsepower Quantity   Image: Constraint of the second
	Only VFDs with a rated horsepower of 50 HP or lower are eligible to receive a rebate.

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

## **Building Characteristi**

Please provide photo of heating sys nameplate for homes with Elec Resistance or Heat Pump heating

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APPLICATION FORM



3	CONTRACTOR INFORMATION
	Company Name:License #: (if applicable)Contact Person:Phone:
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:
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: