New Mexico Commercial 2024 HVAC Controls Rebates

APPLICATION FORM



All rebate applications are due by December 31st the year of equipment purchase and installation.

EPE CUSTOMER INFORMATION

1

EPE Account Num	per 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 Con	trols Present: (Check on	ne) Yes	No
Cooling Type: (Che	ck one) Refrig	gerated Air Evaporative	e Cooling None
Heating Type: (Che	ck 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:Image: Image:
HVAC Variable Frequency Drives lease provide VFD spec sheet and an aventory of affected HVAC equipment	Equipment Type: (Check one) Supply Fan Return Fan Cooling Water Pump Hot Water Pump WSHP Circulation Pump Cooling Tower Fan
	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 Characterist

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

Please provide VFD spec sh inventory of affected HVAC

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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:		