

Required Rebate Information:

Your Name: _____

Installation Address*: _____

***Product must be installed at this location**

City: _____ State: _____ Zip: _____

Email: _____

I would like to be added to the residential e-newsletter for tips and promotions Yes No

Mailing Address (if different than installation address):

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

Your Electric Utility: _____

Utility Account #: _____

How did you hear about Efficiency Smart's rebates?

Check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Utility Office |
| <input type="checkbox"/> Friend/Family/Neighbor | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Retailer/Salesperson | <input type="checkbox"/> Website |
| <input type="checkbox"/> Email | <input type="checkbox"/> Utility Bill |
| <input type="checkbox"/> Event | |
| <input type="checkbox"/> Other: _____ | |

Get money back from Efficiency Smart on your purchase of qualified energy-efficient products. This rebate offer is good while funds are available and may be subject to change without prior notice. All rebate requests must be postmarked or emailed within three months of purchase date and no later than January 7 of the following year. Eligible products must be installed at an address served by a participating electric system. All products must be new to qualify. Used or refurbished products are not eligible for a rebate.

REQUIRED PRODUCT INFORMATION:

Clothes Washer

Manufacturer	Model Number	Hot Water Heater Type (check one) <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other (Specify)
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Electric Clothes Dryer

Manufacturer	Model Number
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Refrigerator

Manufacturer	Model Number
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Dehumidifier

Manufacturer	Model Number	Product Capacity (pints/day)
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Smart Thermostat

Manufacturer	Model Number	Serial Number
Primary Heating Fuel Type <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas	Does your home have central air conditioning? (yes/no)	Replaced Thermostat Information (check one) <input type="checkbox"/> Existing manual thermostat <input type="checkbox"/> N/A new construction <input type="checkbox"/> Existing programmable thermostat <input type="checkbox"/> Unknown

Steps to receive your rebate:

1. Fill out this form completely.
2. Enclose or attach a copy of your dated sales receipt and a recent electric bill along with this form.
3. Mail or email the documents to the address below.

Not all ENERGY STAR products are eligible for rebate. Some products must meet the higher standards of the Consortium for Energy Efficiency's (CEE) Tier 2 or Tier 3 specifications or other criteria to qualify. Please read each product's rebate information thoroughly for any qualifying statements.

Only those customers who have a current account with a municipal electric system that participates in Efficiency Smart and whose product(s) meets all requirements are eligible for rebates.

Mail to: Efficiency Smart – Rebate Offer
1111 Schrock Road, Suite 203
Columbus, OH 43229

Email to: home-rebates@efficiencysmart.org

Cold Climate Air Source Heat Pump / Air Source Heat Pump*

Rebate Type (check one)		
<input type="checkbox"/> Cold Climate Air Source Heat Pump <input type="checkbox"/> Air Source Heat Pump		
Heating/Cooling System Replaced (check all that apply)		
<input type="checkbox"/> Central Air Conditioner <input type="checkbox"/> Gas Heating System <input type="checkbox"/> Heat Pump <input type="checkbox"/> Electric Baseboard Heat System <input type="checkbox"/> Window Air Conditioner <input type="checkbox"/> Unknown		
Fill out either the following section		
AHRI Certified Reference Number (obtained from contractor)		
Or the sections below		
Manufacturer	Indoor Unit Model Number (Evaporator coil and/or air handler)	
Outdoor Unit Model Number	Furnace Model Number	
Product Capacity (Btu/hour)	Product SEER Rating	Product HSPF Rating

Heat Pump Water Heater

Manufacturer	Model Number	Water Tank Location (check one)
		<input type="checkbox"/> Conditioned Space <input type="checkbox"/> Unconditioned Space (basement with no direct heat source or thermostat)
Building Space Heat Type (check one)		Does the building have central air conditioner? (yes/no)
<input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Heat pump <input type="checkbox"/> Other (Specify)		

Pool Pump

Manufacturer	Model Number	Type of Pump (check one)
		<input type="checkbox"/> Above-ground <input type="checkbox"/> In-ground

*For the Air Source Heat Pump or Cold Climate Heat Pump, include a copy of your dated sales receipt or invoice that identifies: Licensed contractor's name, address, and phone number; make and model of installed equipment; installation date and address; total amount paid.

