

Commercial furnace, unit heater and water heater rebate application



Use this form for space heating only. Be sure to fill out form completely. Include equipment brand, model and serial number, signatures of purchaser and attach a copy of the dated sales invoice from your retail mechanical contractor, along with all requested signatures. Rebate offer applies only to new natural gas furnaces (92 percent or greater efficiency), unit heaters (83 percent or greater efficiency), and water heaters (88 percent or greater efficiency). The rebate application form must be submitted by Dec. 15 of the calendar year in which the equipment is installed. See other side for more information.

CUSTOMER INFORMATION

Gas bill acct # (required)

Company _____

Contact person _____ Phone () _____

Mailing address _____

City / State / ZIP _____

E-mail address* _____

If different from above, name and address where equipment is installed _____

MECHANICAL CONTRACTOR INFORMATION

Company _____

Address _____

City / State / ZIP _____

Contact _____

Phone () _____

Customer _____ Date _____

**By providing your e-mail address, you are giving us permission to send you e-mail about the Heating System Rebate and other programs and services.*

EQUIPMENT INFORMATION

Check one: <input type="radio"/> Furnace <input type="radio"/> Unit heater <input type="radio"/> Water heater	Brand _____	Complete model # _____	Serial # _____
Full load hrs _____	Btu/hr input _____	Btu/hr output _____	Efficiency rating (AFUE) _____
Installation date _____			

Check one: <input type="radio"/> Furnace <input type="radio"/> Unit heater <input type="radio"/> Water heater	Brand _____	Complete model # _____	Serial # _____
Full load hrs _____	Btu/hr input _____	Btu/hr output _____	Efficiency rating (AFUE) _____
Installation date _____			

Check one: <input type="radio"/> Furnace <input type="radio"/> Unit heater <input type="radio"/> Water heater	Brand _____	Complete model # _____	Serial # _____
Full load hrs _____	Btu/hr input _____	Btu/hr output _____	Efficiency rating (AFUE) _____
Installation date _____			

CENTERPOINT ENERGY BUSINESS USE ONLY				Requesting Co:		CenterPoint Energy, A/P payment req		
Equipment	Btu/hr input	Rebate amount	SIC	G/L acct	Cost center	Internal order	Chg co.	Amount
92% Furnace		\$	Rate class	562020		11021956	0072	
94% Furnace		\$	DKT saved	Date	Date required	Requested by	TOTAL	
83% Unit heater		\$		Approved (print) Angela M. Kline		Approved (sign)		
88% Water heater	x \$140	\$						

RETURN CHECK TO COMMERCIAL REBATE PROCESSING, LASALLE PLAZA

IMPORTANT REQUIREMENTS

1. Qualifying equipment must have a minimum efficiency of:
 - 92 percent for furnaces
 - 83 percent for unit heaters
 - 88 percent for water heaters
2. All qualifying equipment must be fully installed in a location served by CenterPoint Energy in Minnesota.
3. Enclose contractor invoice showing separate figures for equipment, labor, and taxes.
4. Enclose combustion efficiency documentation for all equipment not rated by GAMA (Gas Appliance Manufacturers Association).
5. All required information must be submitted before rebate can be paid.
6. Applications must be received by Dec. 15 of the calendar year in which the equipment is installed. To avoid delays in rebate processing, please submit your paperwork as soon as equipment installation is complete.

For any equipment installed between Dec. 15 and Dec. 31, please contact CenterPoint Energy for advance rebate approval.
7. Please allow six to eight weeks for rebate processing.

Mail completed paperwork to:

Commercial Rebate Processing
CenterPoint Energy
PO Box 59038
Minneapolis, MN 55459-0038

For more information

Call our Business Customer Hotline or visit our Web site.
612-321-4939 (toll free 1-877-809-3803)
CenterPointEnergy.com/BusinessRebates

Note: For questions about process heating equipment, please call your account manager or 612-321-4330 (1-800-234-5800, ext. 4330).

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The account number is vital to processing your rebate. Please include.

and serial number, signatures of purchaser and attach a copy of the dated sales invoice apply to new natural gas furnaces (92 percent or greater efficiency), unit heaters rebate application form must be submitted by Dec. 15 of the calendar

Complete in full so we can include this detail in our records.

This is the address where the rebate check will be sent. Complete in full.

CUSTOMER INFORMATION

Gas bill acct # (required)

Company ABC Company Inc.

Contact person Joe Owner Phone (123) 456 7890

Mailing address 123 Jefferson Avenue

City / State / ZIP Jefferson, MN 55555

E-mail address* Joe.Owner@ABC.company.net

If different from above, name and address where equipment is installed ABC Company
234 Jefferson Avenue, Jefferson, MN 55555

MECHANICAL CONTRACTOR INFORMATION

Company Heater Sales and Services

Address 456 Jackson St.

City / State / ZIP Jackson, MN 55666

Contact Joe Heater

Phone (234) 567 8901

Customer _____ Date _____

*By providing your e-mail address, you are giving us permission to send you e-mail about the Heating System Rebate and other programs and services.

Include as much product detail as possible. Include a copy of the invoice for reference.

EQUIPMENT INFORMATION

Check one: Furnace Unit heater Water heater Brand Water Heater American Complete model # ABC123 Serial # 23456-789

Full load hrs _____ Btu/hr input 200,000 Btu/hr output 95% Efficiency rating (AFUE) _____ Installation date _____

Check one: Furnace Unit heater Water heater Brand _____ Complete model # _____ Serial # _____

Full load hrs _____ Btu/hr input _____ Btu/hr output _____ Efficiency rating (AFUE) _____ Installation date _____

Check one: Furnace Unit heater Water heater Brand _____ Complete model # _____ Serial # _____

Full load hrs _____ Btu/hr input _____ Btu/hr output _____ Efficiency rating (AFUE) _____ Installation date _____

CENTERPOINT ENERGY BUSINESS USE ONLY				Requesting Co: 0072		CenterPoint Energy, A/P payment req (Non-PO)		
Equipment	Btu/hr input	Rebate amount	SIC	G/L acct	Cost center	Internal order	Chg co.	Amount
92% Furnace		\$ 0.00	Rate class	562020		11021956	0072	
94% Furnace		\$ 0.00	DKT saved	Date	Date required	Requested by	TOTAL	
83% Unit heater		\$ 0.00						
88% Water heater	x \$140	\$ 0.00		Approved (print) Angela M. Kline		(sign)	Approved	

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Note: It is important that you include all copies of invoices. Also include a product specification sheet, shop drawing or owner's manual.