



### Customer Information:

Name of Customer (as it appears on TID bill)		TID Account Number
Address of Installation	City / State / Zip	Phone Number
Name of Owner (if different than Customer)		Owner Phone Number (if different than above)
Payee of Rebate Check (if different than Customer)		
Mailing Address for Rebate Check (if different than above)		City / State / Zip

### Rebate Information:

#### Clothes Washer | Refrigerator | Room Air Conditioner | Solar Attic Fan | Whole House Fan

Item / Appliance	Purchase Date	Installation Date	Manufacturer	Model #	Size (cu. ft., BTU/hr, CFM)

Please include copies of dated sales receipts (and "Energy Guide" for clothes washer, refrigerator, and room air conditioner).

#### Radiant Barrier

Radiant Heat Rejection Rating	Purchase Date	Installation Date	Attic Square Footage
%			sq. ft.

#### Sun Screen

Total Square Footage Installed: \_\_\_\_\_ sq. ft.

## Rebate Information: (cont.)

### Compact Fluorescent Lights (CFLs)

	15 watts or less	16 - 24 watts	25 watts or more
Quantity Purchased			

### Air Conditioner Replacement

#### Installing HVAC Contractor Information (if applicable)

Company Name		CA State Contractor License Number
Mailing Address	City / State / Zip	Phone Number
Installing Contractor Signature		Date

#### Central Air Conditioner Data

New Equipment Information				Old Equipment Information	
Condenser Manufacturer Name		Condenser Model Number		<i>Please provide the following information about the equipment being replaced.</i>	
AHRI Reference Number	SEER	EER			
Indoor Coil Manufacturer Name		Indoor Coil Model Number		Manufacturer Name	
Cooling Capacity (tons)		Configuration (circle)		Model Number	Year Manufactured
	Type (circle)		Split	SEER	EER
	Standard	Heat Pump	Packaged		
Building Permit Number	Jurisdiction (City or County issuing permit)			Cooling Capacity (tons)	Is the unit operational? _____ Yes _____ No

Attach Certificate of AHRI-Certified Performance for the newly installed unit which can be obtained at [www.ahrinet.org](http://www.ahrinet.org).

## Applicant's Signature:

I hereby agree to the terms and conditions of the program set forth by Turlock Irrigation District (TID). I have read and understand the program qualifications and requirements and attest that all submitted information is complete and correct. I agree to verification by TID of both product documentation and installation.

Customer Signature	Date
Owner Signature (if different than Customer)	Date