

ENERGY STAR[®] A/C, FURNACE & HEAT PUMP REBATE

Application Form

MMU CUSTOMER INFORMATION (please print)

Customer name _____ Daytime phone number _____ Tax ID or SSN (if Commercial acct.) _____

Mailing address _____ City _____ State _____ Zip Code _____

Installation Address (if different from above) _____ City _____ State _____ Zip Code _____

I am a: **Residential Customer:** Owner/Occupant Owner/Non-Occupant
 Commercial Customer

CENTRAL A/C, HEAT PUMP, and FURNACE INFORMATION

Manufacturer _____ Condenser Model Number _____ Furnace/Air handler Model Number _____

A-coil Model Number _____ SEER/EER Rating _____ HSPF/COP (heat pump) _____ Furnace Efficiency (gas) _____

AHRI Certification Number _____ Thermostat Manufacturer _____ Model Number _____

Purchased from _____ Phone number _____ Installation Date _____

Electrician _____ Phone number _____ Installation Date _____

New construction Replacement Type of equipment replaced: _____

CENTRAL AIR CONDITIONER *

(SEER \geq 14.5) Tons: _____ X \$100 per ton = _____

HEAT PUMP

Air to Air* (SEER \geq 14.5) Tons: _____ X \$150 per ton = _____

Ground Source Tons: _____ X \$200 per ton = _____

ENERGY SAVING PROGRAMMABLE THERMOSTAT Installed X \$25 = _____

HIGH EFFICIENCY ECM BLOWER MOTOR Installed X \$100 = _____

(Please allow up to 6 weeks for reimbursement) **Rebate Total \$** _____

***Load Management receiver (ELF) required for rebate.** Installed

(Copy of invoice is required)

Customer Signature _____ Date _____

Approved By: _____	For office use only Date: _____	Acct# _____
<input type="checkbox"/> ELF Verified <input type="checkbox"/> Check Issued # _____ / /		Amount\$ _____