

High-Efficiency Quality Install Cooling  A/C  ASHP --  ≥15 SEER  ≥18 SEER

Read all rebate qualifications on the third page of this form. *Application will be returned without valid purchase receipt/invoice.*

| Customer Information (Please Print)  |  |  |          |
|--|--|--|----------|
| Company Name   | Contact Name   | Date Submitted   |          |
| Installation Address   | City   | State  | ZIP Code |
| Mailing Address  | City   | State  | ZIP Code |
| Phone  | Installation (Completion) Date   |  |          |
| Email Address (By providing your email address, you are granting The Utility permission to send emails regarding this project and/or updates on our incentive programs.) | Building Use – Please Check One:   |  |          |
|  | <input type="checkbox"/> Office <input type="checkbox"/> Retail <input type="checkbox"/> 24-hour Facility <input type="checkbox"/> Warehouse<br><input type="checkbox"/> Restaurant <input type="checkbox"/> Lodging <input type="checkbox"/> Grocery/Supermarket <input type="checkbox"/> Manufacturing |  |          |
| Municipality Utility Name & Account Number   | School: <input type="checkbox"/> Elementary/Secondary <input type="checkbox"/> College      Healthcare: <input type="checkbox"/> Clinic <input type="checkbox"/> Hospital  |  |          |
|  | <input type="checkbox"/> Other/Miscellaneous: _____  |  |          |
| Business Type: <input type="checkbox"/> New Construction <input type="checkbox"/> Existing   |  | Facility Hours of Operation: Hours per Year (hours x days x weeks) |          |

|   |                                 |
|---|---------------------------------|
| Customer hereby certifies that: 1. the customer is solely responsible for the accuracy of the application information; 2. all installation is complete and operational prior to submitting this application; 3. all rules of this program (listed on page 3) have been followed; 4. Bright Energy Solutions and the local Municipal Utility are not liable for any work performed; 5. The customer agrees to all terms and conditions (listed on page 3) of this program. |                                 |
| Customer Signature  | Print Name                      |
|   | Title (if applicable)      Date |

|  |              |       |          |
|--|--------------|-------|----------|
| <b><i>If payment is to be made to an Alternative Recipient, please complete the remainder of this section:</i></b> |              |       |          |
| Company Name   | Contact Name | Phone |          |
| Address  | City         | State | ZIP Code |

| Units must be <5.4 cooling ton split systems only. |      |               |
|--|------|---------------|
| Equipment  | HSPF | 2019 Rebate   |
| A/C ≥15 SEER                                       | N/A  | \$140 per ton |
| A/C ≥18 SEER                                       | N/A  | \$180 per ton |
| Heat Pump ≥15 SEER                                 | ≥8.5 | \$140 per ton |
| Heat Pump ≥18 SEER                                 | ≥9.5 | \$180 per ton |
| Furnace or Air Handler With ECM Fan Motor          |      | \$150         |
| Natural Gas Furnace AFUE ≥ 96%                     |      | \$200         |

**Equipment Information**

NOTE: An invoice showing the purchase date, equipment manufacturer, model numbers and serial numbers must be submitted with the application, and it must match the information below EXACTLY.

|   |  |   |
|---|--|---|
| Installation Date: _____  | Startup/Testing Date: _____  | Outdoor Temp: _____ ° F (Min. outdoor temperature allowed: 55° F) |
| Manufacturer _____  | <input type="checkbox"/> Check here if unit is Multi-Stage      BTU _____          |   |
| Condenser model number _____  | Condenser serial number _____  |   |
| Evaporator coil model number _____  | Evaporator coil serial number _____  |   |
| Furnace model number _____  | Furnace serial number _____  |   |
| System AHRI reference number _____  | SEER Rating _____ HSPF _____ ahridirectory.com                                     |   |
| ECM Furnace Fan Rebate: <input type="checkbox"/> Yes <input type="checkbox"/> No                | If ECM Fan: Furnace AHRI reference number _____                                    |   |
| ECM Air Handler Rebate: <input type="checkbox"/> Yes <input type="checkbox"/> No                | If ECM Air Handler Fan: Attach air handler spec sheet showing that ECM is present. |   |
| Gas Furnace Rebate: AFUE ≥ 96%: <input type="checkbox"/> Yes                                    |  |   |
| Furnace AFUE: _____ Input BTUH: _____ AHRI Reference Number: _____ Furnace Serial Number: _____ |  |   |

**Installation Information**

Please complete the following airflow tests and the appropriate refrigerant charge tests. Make sure to fill out ALL boxes or the application will be returned.

|  |  |                                    |  |  |
|--|--|------------------------------------|--|--|
| <b>SIZING</b>  | 1. A completed load calculation is on file <input type="checkbox"/> Yes <input type="checkbox"/> No  | <b>REFRIGERANT CHARGE</b>          | 11. Liquid line pressure _____ PSIG          |  |
|  | 2. Amps – Compressor _____ amps  |                                    | 12. Liquid line temperature _____ degrees    |  |
| <b>AIRFLOW</b>   | 3. Amps – Furnace _____ amps   | <b>TXV SYSTEM</b>                  | 13. Actual subcool temperature _____ degrees |  |
|  | 4. Return dry bulb temperature _____ degrees   |                                    | 14. Target subcool temperature _____ degrees |  |
|  | 5. Return wet bulb temperature _____ degrees   |                                    | 15. Difference (14-13) _____ degrees         |  |
|  | 6. Supply dry bulb temperature _____ degrees   |                                    | <b>NON TXV SYSTEM</b>                        | 16. Suction line pressure _____ PSIG       |
|  | 7. Supply wet bulb temperature _____ degrees   |                                    |  | 17. Suction line temperature _____ degrees |
|  | 8. Total external static pressure (IWC) (i.e. inches water column) _____ IWC   | 18. Actual superheat _____ degrees |  |  |
|  | 9. CFM Fan Speed L <input type="checkbox"/> M <input type="checkbox"/> MH <input type="checkbox"/> H <input type="checkbox"/> ECM <input type="checkbox"/>   | 19. Target superheat _____ degrees | <b>DUCTWORK</b>                              | 20. Difference (19-18) _____ degrees       |
| A. Check one above: (L=Low, M=Medium, H=High, MH=Medium High, ECM=Electronically Commutated Motor) | Which method was used to seal exposed ductwork?  |                                    |  |  |
| B. Measured air flow (including ECM) _____ CFM   | <input type="checkbox"/> UL-181B-M approved and labeled mastic UL-<br><input type="checkbox"/> 181B-FX foil-faced, butyl-backed tape<br><input type="checkbox"/> Mastic with fiberglass mesh tape (9x9 mesh weave)<br><input type="checkbox"/> OEM-approved equivalent |                                    |  |  |
| 10. Type of refrigerant _____  |  |                                    |  |  |

| Summary of Incentives                     |    |
|---|----|
| A/C ≥15 SEER                              | \$ |
| A/C ≥18 SEER                              | \$ |
| Heat Pump ≥15 SEER                        | \$ |
| Furnace or Air Handler With ECM Fan Motor | \$ |
| Natural Gas Furnace AFUE ≥ 96%            | \$ |
| <b>Total Incentive:</b>                   | \$ |

**Registered Contractor Information**

|  |   |       |          |
|--|---|-------|----------|
| Contractor Company Name  | Primary Rebate Contact  | Phone |          |
| Mailing Address  | City  | State | ZIP Code |
| Email Address (By providing the vendor's email address, you are granting The Utility permission to send emails regarding this project and/or updates on our incentive programs.) | Contractor Signature  |       |          |
|  | _____ Date: _____<br>I hereby certify that all information is accurate, including claims of efficiency, size and customer information. Reasonable efforts have been made to follow the guidelines of ANSI / ACCA Standard |       |          |

**Utility Use Only**

|  |   |  |  |   |
|--|---|--|--|---|
| Date Received:   | Pre-Inspected? <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Pre-Inspected: _____<br>Initials: _____ | Post-Inspected? <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Post-Inspected: _____<br>Initials: _____ |
| Incentive Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No | Amount: \$  | Date Approved:                               | Utility or Program Representative  |   |

## Rebate Details

Once completed paperwork is submitted, incentive payments are usually made within 4 – 8 weeks. Incomplete applications will either delay payments or be denied. Bright Energy Solutions is not responsible if the contractor provides inaccurate information about the amount and/or conditions of the actual rebate or equipment eligibility.

Qualifying equipment must be purchased and installed between January 1, 2019, and December 31, 2019. A signed application and itemized invoices for materials and labor must be submitted to the participating utility within 30 calendar days of installation and completed testing. If testing is delayed due to outdoor temperatures, the application must be submitted within 30 days of testing, but no later than July 31, 2020. Only one rebate per piece of equipment will be paid. Furnaces may be eligible for ECM rebate and high-efficiency natural gas rebate.

Bright Energy Solutions reserves the right to refuse payment and participation if the customer or contractor violates program rules and procedures. Bright Energy Solutions is not liable for rebates promised to customer as a result of a contractor misrepresenting the program. Bright Energy Solutions does not expressly or implicitly warrant the performance of installed equipment (contact your contractor for detailed equipment warranties), and shall not be liable for any and all claims arising from or related to the installed equipment. **All information on the receipt or invoice must match the information on the rebate application or the application will not be processed.**

We reserve the right to conduct random inspections to verify installation of the rebated equipment at the address indicated on the front of this form. If we select your application for a random inspection, the rebate application will not be processed until the inspection has been satisfactorily completed. Inspections may also be performed after rebate payment at Bright Energy Solutions' discretion. The local participating Municipal Utility reserves the right to load manage (cycle on or off) customer equipment that qualifies for incentives under this program. Participation in the program may be publicized, and information contained in the application may be shared with state boards, commissions, departments, and other Bright Energy Solutions participating utilities.

## Limitations

Rebate qualifications and amounts are subject to change at any time. Our rebate programs may be cancelled without notice. Please visit us at [www.brightenergysolutions.com](http://www.brightenergysolutions.com) to determine whether any program changes have occurred. Total energy efficiency rebates per business customer are limited to \$100,000 per year unless otherwise authorized by Bright Energy Solutions.

## Qualifying Customers

Participating Municipal Utility electric commercial (business) customers are eligible for Quality Install rebates. Equipment must be served by the participating Municipal Utility under a commercial or industrial rate. **Qualifying equipment must be purchased from and installed by a contractor who is currently registered with the Bright Energy Solutions High-Efficiency Quality Install Cooling Rebate Program.** These contractors have agreed to the terms of the program and have met training qualifications. A list of participating contractors can be found on our website. Rebate applications from unregistered contractors will not be accepted.

## Qualifying Equipment

Customer must select a new, high-efficiency split system cooling as described in the previous rebate chart. The system must be matched, which means the outdoor condenser unit and the indoor evaporator coil were designed by the manufacturer to work together to provide top performance and maximum efficiency. No mini-split (ductless) units allowed. Used equipment does not qualify.

If more than one unit is installed at an address, one rebate form per unit is required to receive a rebate for each unit.

**Only equipment listed on the AHRI site ([ahridirectory.org](http://ahridirectory.org)—residential section only) will qualify.** Efficiency ratings are determined using the Air-Conditioning, Heating, and Refrigeration Institute (AHRI), [ahridirectory.org](http://ahridirectory.org).

Submitting an AHRI certificate with your application and invoice is highly recommended. The AHRI list of qualifying equipment is dynamic and changes frequently. AHRI certificates that are printed, within two weeks of the installation date, and sent in with the rebate application will be honored even if the equipment is no longer listed on the dynamic website.

\*The use of a furnace's variable speed fan to increase the SEER rating above the nominal rating will be allowed for determining rebate eligibility provided the furnace was installed within one year prior to the air conditioner purchase. The overall furnace and air conditioning rating must be found in the AHRI directory. An invoice for the furnace must also be included in the final submitted paperwork.

Multi-stage AC units are eligible for rebates for matching furnaces that were installed previously. The invoice must clearly state "multi-stage furnaces."

## Installing and Testing the Equipment

In order to verify that the equipment has been properly installed, the contractor must activate the system and perform tests relating to the airflow and refrigerant charge. These tests can only be conducted when the outdoor (ambient) temperature is 55 °F or higher. Rebate applications may not be submitted until the equipment has been tested. Using alternative test environments such as blocking the condenser will result in a denied rebate. If a qualifying system is purchased and installed on or before December 31, 2019, but conditions do not allow for equipment testing at the time of installation, the customer will still be eligible for the rebate as long as testing is completed and the application submitted by July 31, 2020.

Send Completed Application & Supporting Documents to:

*Please include the items listed below on your application form and purchase receipt/invoice. If all of the items are not included the rebate cannot be given.*

### Send to Participating Local Municipal Utility (and keep a copy):

#### 1. Your purchase receipt/invoice, with these details:

- |   |   |
|---|---|
| <input type="checkbox"/> Customer name        | <input type="checkbox"/> Size or capacity |
| <input type="checkbox"/> Installation address | <input type="checkbox"/> Serial number    |
| <input type="checkbox"/> Brand                | <input type="checkbox"/> Invoice date     |
| <input type="checkbox"/> Model number         | <input type="checkbox"/> Efficiency level |

#### 2. This rebate form, completely filled out

*Attaching an AHRI certificate for the equipment you installed is highly recommended. Include thermostat and air handler spec sheets if applicable.*

### Contractors keep in their file:

1. A copy of everything sent to Bright Energy Solutions
2. The load calculation used to "right size" the unit

Your Local Participating Municipal Utility