

2018 SAFE APPLIANCE REBATE PROGRAM APPLICATION

(Customers MAY NOT submit this form directly. Only propane marketers may apply.)

APPLICANT INFORMATION	
Name:	
Mailing Address:	
City, State, Zip:	
Phone:	Email:
Installation Address (if differen Street:	than above)
City, State, Zip:	
performance with respect to energy conser Mid-Atlantic PREF for the purpose of verify that this rebate of \$200 per appliance is av The propane marketer seeking part of the participating propane marketer inspection after the installation of each nev qualifying installations must, at a minimum lock up test on the regulator[s]. The propan the manufacturer's installation instruction heater and, by issuing a rebate, makes no r	equipment for a period of one year from the date of installation in a way that would materially impair the equipment's action, efficiency or air quality. I consent to on-site examination of the above installation by an employee, inspector or agent for a compliance of the installation with program and safety rules. I have received a copy of the program guidelines and understand a lable only through authorized propane marketers in Delaware or Maryland and that the program may end at any time. The rebate must submit a full and complete Application form. Submission of the Application form constitutes a representation on the hat the work shown on the form has actually been completed. The participating propane marketer must perform a safety qualifying appliance and the result of that inspection must be documented on the Application form. The safety inspection for include the following: 1) a leak test; 2) a pressure test if required by applicable laws, rules and regulations; and 3) a flow and marketer agrees to comply with all laws, rules and regulations governing the installation of the qualifying appliance(s) and with The Mid-Atlantic PREF assumes no responsibility whatsoever for the installation, inspection or testing of the qualifying water presentation, warranty or guarantee regarding the qualifying water heater. The Mid-Atlantic PREF disclaims any liability for any passes or other damages of any nature whatsoever, whether special, indirect, consequential or compensatory, directly or indirectly water heater.
SIGNATURE OF APPLICANT:	DATE:
PROPANE MARKETER INFORMATION Name: Mailing Address:	ATION Company:
City, State, Zip:	
Phone:	Email:
	d conditions of this rebate program. I affirm that the installation at this location is eligible for a rebate and meets all Mid- t I am authorized to sign this application and affirm that this installation has passed the safety inspection defined in the ached inspection record.
SIGNATURE:	DATE:
APPLIANCE INFORMATION New Construction Brand:	Serial#:
Replacement	
Brand:	Serial#:
Old Brand:	Serial#:
INSTALLATION DATE:	INSPECTION DATE:
CHECKLIST:	
☐ Application filled out of Paid invoice or signed	mpletely, including all signatures ork order, noting appliance cost, serial # & installation date inspection form – must include leak check & regulator tests