



Rebate Assignment

Office Use Only
Rebate:

Month/Year:

This form must accompany completed rebate application(s) and/or required documentation.
Payee and Customer must sign/date. All information is required to process rebate(s).

| CUSTOMER INFORMATION | | | | |
|---|--|---------------|------|--|
| Account # (required) | | | Date | |
| First Name | | Last Name | | |
| Installation Address | | Phone | | |
| City | | State | Zip | |
| Mailing Address (if different than site address) | | Contact Email | | |
| City | | State | Zip | |

| REBATE INFORMATION | |
|-------------------------|----|
| Installed Measure(s) | |
| Estimated Rebate Amount | \$ |

| REBATE PAYABLE TO | | | | |
|-------------------|--|--------------------------|-------|--|
| Name | | Relationship to Customer | | |
| Mailing Address | | Contact Email | Phone | |
| City | | State | Zip | |
| Phone | | Fax | | |

PAYEE SIGNATURE _____ **DATE** _____

By signing above, payee certifies that the installation was completed according to Skamania PUD (PUD) specifications. Payee understands that they are responsible for meeting all program standards, and that payment is not due until program standards are met.

By signing this agreement, customer acknowledges that the measure(s) are installed and operating at the location indicated. Customer agrees to allow PUD or its representative to perform inspections on the work. Customer also certifies that the work was completed within PUD service territory. Customer agrees to release PUD from any liability associated with the completed work, and recognizes that in no way is PUD responsible for the safety or satisfactory performance of this work. PUD will not accept any liability caused by customer's participation in this program.

CUSTOMER SIGNATURE _____ **DATE** _____

Allow 8 to 10 weeks for rebate processing after final inspections and receipt of all the required paperwork.