



Office Use Only
Rebate:

Month/Year:

Rebate Assignment

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 No. (to be added by the Utility)		Date		
Company Name (If Applicable)				
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		
Company Name (If Applicable)				
Mailing Address		Contact Email		
City		State	Zip	
Phone		Fax		

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

PAYEE SIGNATURE _____ **DATE** _____

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

CUSTOMER SIGNATURE _____ **DATE** _____

Allow 3 - 4 weeks for rebate processing after final inspection approval and receipt of all required documentation.